



COUNTY OF ABERDEEN



REPORT

BY THE

MEDICAL OFFICER OF HEALTH

ON THE

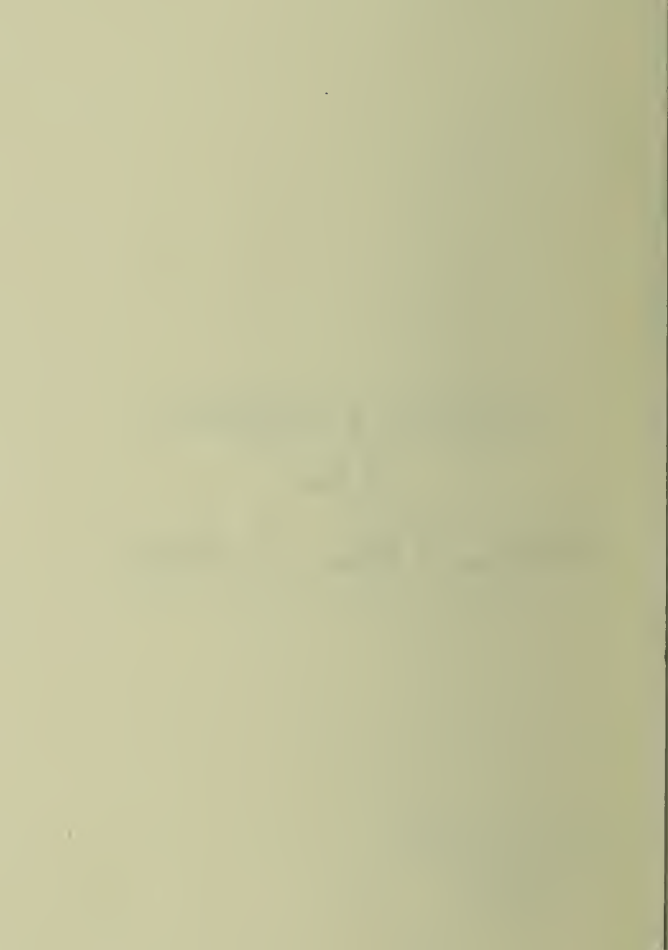
*Health and Sanitary Conditions of the
County of Aberdeen*

FOR THE YEAR

1947

*With the Compliments
of the
Medical Officer of Health.*

County Public Health Office,
4, Albyn Place,
Aberdeen.





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STATISTICAL SUMMARY

(FOR THE LANDWARD AREA AND ALL THE BURGHS)

							1947		1946
1	Acreage	1,244,631	...	1,244,631
2.	Population (Estimated Civilian)	...	...	...	...	...	144,369	...	139,937
3.	Persons married per 1,000 population	...	...	...	...	...	7.1	...	7.6
4.	Number of Live Births (Corrected)	...	...	...	...	...	3,313	...	3,296
5.	Birth-rate per 1,000 population	...	...	...	...	...	22.9	...	22.9
6.	Illegitimate Birth-rate per 100 Births	...	...	...	...	...	9.1	...	9.7
7.	Infantile Death-rate per 1,000 Births	...	...	...	...	...	49	...	45
8.	Maternal Mortality per 1,000 Live and Still Births	...	...	...	...	...	1.5	...	1.2
9.	Number of Deaths from all Forms of Tuberculosis	...	...	...	...	...	59	...	59
10.	Number of Deaths from Pulmonary Tuberculosis	...	...	...	...	...	50	...	44
11.	Death-rate from Pulmonary Tuberculosis per 1,000 population	...	...	...	...	...	0.35	...	0.31
12.	Number of Deaths from Non-pulmonary Tuberculosis	...	...	...	...	...	9	...	15
13.	Death-rate from Non-pulmonary Tuberculosis per 1,000 population	...	...	...	...	...	0.06	...	0.11
14.	Number of Deaths (Corrected) All Causes	...	...	...	...	...	1,668	...	1,715
15.	Death-rate—All Causes	...	...	...	...	...	11.6	...	12.3



PREFACE

I beg herewith to submit the Annual Report on the Health and Sanitary Conditions of the County of Aberdeen for the year 1947. Reports by the Regional Bacteriologist and the County and Burgh Sanitary Inspectors are also incorporated.

The medical and professional staff consists of the Medical Officer of Health; one Senior Assistant Medical Officer; the Regional School Medical Officer with two Assistant Medical Officers of Health and one part-time Medical Officer engaged in immunisation work; the Regional Maternity and Child Welfare Officer; the Regional Tuberculosis Medical Officer and the County Tuberculosis Medical Officer. The nursing services are under the executive control of a whole-time Superintendent of Nurses.

**Professional
Staff**

There are 5 whole-time Dental Surgeons. The Sanitary Staff comprises the County Sanitary Inspector, 9 District Sanitary Inspectors and 2 Assistant Sanitary Inspectors. There are 3 Milk Officers.

The population of the County, both Districts and Burghs, as estimated by the Registrar-General to the middle of 1947, was 144,369, as compared with 139,937 in 1946.

Population

In 1945, the birth-rate was 18; it rose to 22.9 in 1946, and this rate was maintained in 1947.

Birth-rate

In 1947, the general death-rate was 11.6 per 1,000 of population, whereas it was 12.3 in 1946 and 12 in 1945. In the quinquennial period 1940-44, the death-rate was 12.4.

Death-rate

In 1947, the incidence of the ordinary infectious diseases was remarkably low. One hundred and fifty-five cases of scarlet fever were notified as against 209 in 1946. There were no deaths from this disease.

**Infectious
Diseases**

In 1947, three cases of diphtheria were notified—the lowest on record. There was one death, particulars of which are given in the body of the Report. The progress of the diphtheria immunisation scheme is explained in subsequent pages.

The outbreak of Poliomyelitis which affected the country as a whole accounted for 32 cases between the months of July and November. Fortunately, there were no deaths.

The history of two outbreaks of Dysentery are given in the section of the report entitled "Morbidity and Mortality from Infectious Diseases."

Statistics for 1947 revealed a rather disturbing feature, namely, that there was a further increase both in the number of patients notified as suffering from pulmonary tuberculosis and also in the number of those dying from this type of the disease. The relatively small number of County patients involved would not make the results have much statistical significance were it not that there is a similar upward trend throughout Scotland.

Tuberculosis

So far, hospital accommodation has proved adequate for the needs of the County, and if it should prove in the future to be inadequate it will be due to lack of nursing staff rather than to lack of beds. During the latter half of the year the number of girls who undertook nursing duties in the County Institutions was small and recruitment was especially difficult in the case of the County Hospital, Strichen, and of Newhills Sanatorium, Bucksburn.

There are three main reasons why girls hesitate to work in Tuberculosis Institutions. Firstly, in such institutions as those at Strichen and Newhills, the girls receive no Certificate of Training, and are, to some extent, wasting their time. Secondly, the nursing of long-term cases, many of whom are incurable and tend by reason of their illness to be querulous and ungrateful, puts a great physical and mental strain on young nurses. Thirdly, most parents regard the nursing of cases of pulmonary tuberculosis as a dangerous profession and object to their daughters undertaking this work. Under modern conditions and provided that the nurse is physically sound—as is ascertained before she is engaged—the danger of becoming infected is negligible.

The real solution appears to be to set aside in large general hospitals wards for the reception and treatment of pulmonary cases so that all nurses, during their period of training, will have a tour of duty in these wards. In these circumstances, instead of giving additional remuneration for nursing the tuberculous, it would be made known to prospective nurses and their parents that the nursing of the tuberculous is no more dangerous than the nursing of the ordinary sick in a general hospital.

**Maternity
and Child
Welfare
Services**

The scope of the Maternity and Child Welfare Services continues to expand. All the County practitioners, save two, participated in the County's Scheme under the Maternity Services (Scotland) Act, 1937, whereby every expectant mother who applies to the Local Authority may have the services both of a doctor and also of a midwife.

There are nine Child Welfare Clinics in the County—7 in Burghs, one in Bucksburn and one in Culter. The premises in which several of the Clinics are held cannot be regarded as satisfactory.

The infantile mortality rate was 49 as compared with 45 in 1946, and 42 in 1945. The maternal mortality rate was 1.5 as compared with 1.2 in 1946, which was the lowest rate ever recorded in the County.

**Nursing
Services**

The midwifery, home nursing, school nursing and health visiting were performed by District Nurses most of whom are Queen's Nurses. The County has not yet been covered by a network of nurses, and, in the Buchan area of the County, it was necessary to employ several Health Visitors and Midwives.

**School
Medical
Services**

The medical inspection and treatment of school children have been carried out as in previous years. The chief defect in this service has been the inability to obtain an adequate number of dental surgeons. With the coming into operation of the National Health Service (Scotland) Act, 1947, this defect will tend to become aggravated.

**Sanitary
Services**

A synopsis of the Reports by the County Sanitary Inspector and by the Burgh Sanitary Inspectors is given in Section X.

**Acknow-
ledge-
ments**

I again wish to record my thanks to the Council and to the members of the Public Health Committee for their support during the year. I have also to express appreciation for the assistance given by the County Clerk and his staff and for the excellent work performed by my professional and clerical colleagues.

HARRY J. RAE,

Medical Officer of Health

COUNTY PUBLIC HEALTH DEPARTMENT,

4 ALBYN PLACE, ABERDEEN,

1st November, 1948.

SECTION I.

General Public Health of the Districts and Burghs.

1. VITAL STATISTICS

Population

The population of the County, both Districts and Burghs, as estimated by the Registrar-General to the middle of 1947, was 144,369.

In 1947, the natural increase in the population, that is the excess of births over deaths, was 1,645, as compared with 1,583 in 1946.

Marriages

The population figure employed in estimating birth and marriage rates includes an allowance made by the Registrar-General for persons in the Armed Forces.

In 1947, 1,029 marriages were registered as compared with 1,091 in 1946. The marriage-rate, which term means the number of marriages per 1,000 of population, was 7.1 as compared with 7.6 in 1946.

Births

In 1947, the total number of live births, corrected for inward and outward transfers, was 3,313; of these 1,697 were males and 1,616 females.

Of the total births in 1947, 302 were illegitimate and the illegitimate birth-rate for that year was 9.1. The following table shows the births and birth-rates in the County and in Scotland from 1940 to 1947:—

TABLE I

YEAR	ABERDEEN COUNTY				SCOTLAND	
	Births		Birth-rate		Birth-rate	
	Total	Illegitimate	Total	Illegitimate	Total	Illegitimate
1940	2,582	275	17.6	10.7	17.1	5.9
1941	2,604	323	17.8	12.4	17.9	6.6
1942	2,828	358	19.3	12.7	17.6	7.1
1943	2,797	323	19.0	11.5	18.4	7.6
1944	2,767	329	18.7	11.9	19.2	7.9
1945	2,625	348	18.0	13.3	18.0	8.6
1946	3,298	321	22.9	9.7	20.3	6.6
1947	3,313	302	22.9	9.1	22.0	5.6

The number of still births registered in 1947 was 79, as compared with 75 in 1946.

Deaths and Death-rate

After corrections were made for transfers, it was found that the net number of deaths was 1,668, which is equivalent to a death-rate of 11.6 per 1,000 population. The death-rate in 1946 was 12.3.

The total number of deaths registered in Scotland was 66,200, equivalent to a death-rate of 12.9.

Causes of Death

The principal causes of death, together with the number of deaths attributable to the various well-defined diseases, appear in Table II.

TABLE II

CAUSES OF DEATH	COUNTY, including Burghs.	
	1947.	
Diseases of the Heart and other Circulatory Diseases	564	
Cerebral Haemorrhage and other Diseases of Nervous System	249	
Respiratory Diseases—		
Bronchitis	44	
Pneumonia	61	
Other	22	
Cancer	205	
Tuberculosis—		
Pulmonary	50	
Non-pulmonary	9	
Kidney, etc., Diseases	77	
Chief Epidemic Diseases—		
Diphtheria	1	
Whooping Cough	3	
Measles	1	
Scarlet Fever	—	
Enteric Fever	—	
Cerebro-spinal Fever	1	
Other Infectious and Parasitic Diseases	5	
Diseases of the Digestive System, including Diarrhoea and Enteritis ...	93	
Influenza	2	
Puerperal Conditions	5	
Diseases of Early Infancy	79	
Violence	67	

2. MORBIDITY AND MORTALITY FROM INFECTIOUS DISEASES

NOTIFIABLE INFECTIOUS DISEASES

Small-pox

No case of small-pox was notified during 1947.

Scarlet Fever

The numbers of cases of scarlet fever notified from the Districts and Burghs since 1931, were as follows:—

1931	...	...	223	1940	...	...	177
1932	...	...	317	1941	...	...	115
1933	...	...	660	1942	...	...	107
1934	...	...	1,491	1943	...	...	204
1935	...	...	1,408	1944	...	...	134
1936	...	...	1,278	1945	...	...	186
1937	...	...	569	1946	...	...	209
1938	...	...	676	1947	...	...	155
1939	...	...	321				

The age incidence of cases and the percentage in age groups of cases, dealt with either in hospitals or at home, are shown in Table III.

TABLE III

Year	All Ages	Under 1 Year	1-5	5-15	15-25	25-45	45-65	65 and Over	Removed to Hospital	Treated at Home
1947	155	—	36	89	23	6	1	—	146	9
Percentage	100	—	23.2	57.4	14.8	3.9	.7	—	94.2	5.8

Of the 155 notified cases, 146 or 94.2 per cent. were treated in Infectious Diseases Hospitals. Details regarding the cases treated institutionally are given in Table IV. The number of admissions to hospitals is not equivalent to the number of cases treated in hospital, as one case may have been treated in more than one hospital. For example, all cases with severe complications, such as, mastoiditis, are transferred from County Hospitals to the City Hospital, Aberdeen, where specialist advice is easily available.

TABLE IV
Scarlet Fever—Landward Area and Burghs

Hospital.	Number of admissions to Hospital.	Total Period of institutional treatment in days.	Number discharged during year.	Number of days in Hospital per completed case.	Number of deaths.
Inverurie	65	1,315	61	21	—
Aboyne	15	298	15	19	—
Peterhead	64	1,403	60	23	—
City Hospital, Aberdeen	5	75	5	15	—
	149	3,091	141	22	—

Case Mortality
There were no deaths.

Diphtheria and Diphtheria Immunisation

The total number of diphtheria notifications received in 1947 was 3. It will be seen from Table VI. that the number of admissions to hospital was 8. Five of these, however, were subsequently found not to be cases of diphtheria, but to be suffering from other acute throat infections.

The age incidence of these notified cases is seen in Table V.

TABLE V.
AGE INCIDENCE OF NOTIFIED CASES AND DEATHS FROM DIPHTHERIA

Year	1 and under 5		5 and under 15		15 and under 25		25 and under 35		35 and under 45		45 and under 65		65 and upwards	
	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths
1947	2	1	—	—	—	—	—	—	—	—	1	—	—	—

TABLE VI.
DIPHTHERIA
HOSPITAL TREATMENT (Landward Area and Burghs)

Hospital.	Number of admissions to Hospital.	Total Period of Institutional treatment in days.	Number discharged during year.	Number of days in Hospital per completed case.	Number of deaths.
Inverurie	7	224	7	32	1
Aboyne	—	95	1	95	—
Peterhead	1	21	1	21	—
City Hospital, Aberdeen	—	—	—	—	—
Totals	8	340	9	34	1

Mortality
One death occurred in 1947, equivalent to a case mortality of 33.3.

DIPHTHERIA IMMUNISATION SCHEME.

Diphtheria Immunisation was continued at the County Schools and Clinics on the lines set forth in the Scheme which was adopted in 1941. The programme of routine immunisation work at schools was carried out by the temporary assistant medical officer appointed for that purpose in September, 1946.

The additional facilities provided in 1945 for the immunisation of pre-school children by the County medical practitioners at the children's homes or at the doctors' surgeries were taken advantage of by many parents. For this service, fees amounting to £259:9:6d. were paid to medical practitioners.

During the year, 70 schools in the Garioch, Fraserburgh and Huntly areas were visited. The following table gives the record of the work carried out at these schools as well as that performed at the County clinics and privately by medical practitioners, together with relative statistical data on the incidence of and mortality from diphtheria in (a) immunised and (b) non-immunised children. It should be noted that the initial course of immunisation is not regarded as complete till at least 12 weeks have elapsed after the second inoculation. Thus, the figures in the column "number of completed immunisations" only refer to children who have received their second inoculation between 8th October, 1946, and 8th October, 1947, both dates inclusive.

TABLE VII.

NUMBER OF COMPLETED IMMUNISATIONS, MAINTENANCE INOCULATIONS, CONFIRMED DIPHTHERIA CASES AND DEATHS AMONGST THE IMMUNISED AND NON-IMMUNISED DURING THE YEAR 1947
CLASSIFIED ACCORDING TO THE YEAR OF BIRTH.

Year of Birth	Number of Completed Immunisations	Number of Maintenance Inoculations	Immunised Persons		Non-Immunised Persons	
			Confirmed cases of diphtheria	Diphtheria deaths	Confirmed cases of diphtheria	Diphtheria deaths
1947	94	—	—	—	—	—
1946	750	—	—	—	—	—
1945	395	4	1	—	1	1
1944	257	11	—	—	—	—
1943	187	50	—	—	—	—
1942	261	213	—	—	—	—
1941	331	399	—	—	—	—
1940	293	391	—	—	—	—
1939	212	392	—	—	—	—
1938	102	421	—	—	—	—
1937	89	318	—	—	—	—
1936	61	199	—	—	—	—
1935	39	165	—	—	—	—
1934	15	99	—	—	—	—
1933	16	47	—	—	—	—
1932 or earlier	12	28	—	—	1	—
Totals	3,114	2,737	1	—	2	1

Active Immunisation.

The above Table shows that 3,114 children, 89.5% of whom were from 1 to 9 years of age, completed the two-injection course of treatment. Of this number, 1,979 children were immunised at the County Schools, 588 at the County Clinics and 547 privately by medical practitioners. These figures show an increase of 548 and 235 in the number of new children immunised at the County Schools and Clinics respectively, and a decrease of 59 immunised privately, compared with last year. The total number of persons of all ages immunised since the year 1935 is 50,758.

Re-immunisation.

The demand from parents for re-immunisation treatment continues to be satisfactory. During the year, 2,737 children of all ages received further or maintenance inoculations, 80% of whom were from 5 to 11 years of age. This total is a reduction of 1,534 compared with the previous year, which was a record one for the number of re-immunisations completed in one year since the Immunisation Scheme commenced in 1935. Of these inoculations, 2,704 or 98% were carried out at the County Schools. This brings the total number of children re-immunised since 1935 to 25,254.

Diphtheria Incidence.

It is gratifying once again to be able to record that the incidence of diphtheria has reached another low record. The corrected number of diphtheria notifications for the year was 3, which is a reduction of 12 cases as compared with the previous lowest incidence recorded in 1946, and is equal to an incidence rate of 0.02 per 1,000 population. One of the notified diphtheria cases was an adult woman while the other two occurred in children, a boy and a girl, both aged 2 years. The boy was actively immunised against diphtheria and contracted the disease 5 months after immunisation. The girl was not notified to this Department as a case of diphtheria and was subsequently brought to our notice by the Registrar-General who stated that the child had been certified as having died from laryngeal

diphtheria. Further investigation into this girl's case revealed the fact that the child had been sent to the County Infectious Diseases Hospital, Inverurie, but, on arrival at the Institution was found to be dead. Nose and throat swabs taken *post mortem* from the child were negative for diphtheria bacilli. It was also ascertained that no throat swab had been taken prior to the death of the child and that she had never been previously immunised against diphtheria. In these circumstances, the hospital doctor was not prepared to certify the cause of death. The family doctor was a *locum tenens* and he certified the cause of death as laryngeal diphtheria. As this doctor's whereabouts could not be traced to confirm the diagnosis, the Registrar-General had no alternative, in the absence of any other cause of death, but to accept the case as one of laryngeal diphtheria.

Diphtheria Mortality.

The only death from diphtheria to be recorded during the year was that of the above mentioned girl, born in 1945, giving a mortality rate of 0.006 per 1,000 population. This girl, as mentioned previously, had never been actively immunised against diphtheria.

Summary.

The decline in the morbidity and mortality from diphtheria continues in a highly satisfactory manner. The incidence and mortality rates, namely, 0.02 and 0.006 per 1,000 population respectively, were the lowest rates yet recorded in the County. These rates compare very favourably with those recorded in 1935, namely, 4.17 and 0.2 when the present Diphtheria Immunisation Scheme was inaugurated. The results now achieved are most satisfactory and are in no small measure due to the continuous immunising work which has been routinely carried out in the County for the past 13 years. No effort, therefore, must be spared to encourage the immunising and re-immunising of still more children, particularly those of pre-school age, if this highly satisfactory result is to be maintained.

Typhoid and Para-typhoid Fevers

In 1947, no notifications of these diseases were received.

Acute Anterior Polio-myelitis (Infantile Paralysis)

In 1947, there were 34 cases of this disease. All were treated in hospital.

The following remarks regarding the recent outbreak of Polio-myelitis may be of interest. In the first place, this disease is popularly known as "Infantile Paralysis," but this is a misnomer because age-groups older than infants are frequently affected, and, in only a proportion of cases, does paresis or paralysis occur. As a matter of fact, in less than 50% of all cases are there signs of paralysis.

Notifiability and Incidence.

Polio-myelitis became a compulsorily notifiable disease in Scotland in 1926, although, in the area of some Local Authorities, it was compulsorily notifiable before that date.

As a rule, cases of Polio-myelitis are sporadic and few in number, and only 2 cases were notified in the first half of the year. but, in the beginning of July, 1947, the disease assumed epidemic proportions and 32 confirmed cases were notified by the end of November. All were treated in Hospital—2 in the County Hospital, Inverurie, 1 in Huntly Jubilee Cottage Hospital, and the remaining 29 in the City Hospital, Aberdeen. In addition, 17 cases were admitted to Hospital as "suspect" cases but in these the diagnosis was not confirmed.

Characteristic of Epidemic.

There were several outstanding features in the incidence of the County cases. Geographically the cases were widely distributed. In only one instance, were two members of a family affected. From the date of notification of the first confirmed case on 27th July, until 31st August, 17 cases were notified and no case showed sign of paralysis. During that period most of the cases notified were adolescents or adults. From 1st September to 30th November, 15 cases were notified and of these 9 had paralysis; three had paralysis of the facial muscles; in four, the lower extremities were paralysed and in two cases the arms were involved. All the cases who suffered from paralysis were under 14 years of age. No case required treatment in the "Iron Lung." There were no deaths.

Age and Sex Incidence.

The age and sex incidence of the 32 confirmed cases is shown in Table VIII.—

TABLE VIII.

Sex	AGE-GROUPS					
	0-1	2-5	6-10	11-15	16-25	Over 25
Male . . .	3	4	2	4	5	2
Female . .	—	2	4	4	1	1
Totals . . .	3	6	6	8	6	3

The above figures do not include two cases which occurred in the first half of the year, prior to the epidemic.

Methods of Diagnosis.

There is usually a symptom-complex, viz., headache, fever, stiffness of the spine and resistance of the neck to passive flexion. Paresis or paralysis may or may not supervene. In the absence of paresis or paralysis, a definite diagnosis is obtained from an examination of the cerebro-spinal fluid which, in positive cases, shows a marked increase in protein and in cell content.

There are two paralytic types of the disease, one affecting the spinal cord and causing paralysis of the limbs, and the other—the more serious—affecting the cranial nerves and causing paralysis of respiratory, swallowing and eye muscles.

Special Problems that arose.

During this epidemic special questions were asked and the following answers were given:—

- (1) Is it safe to use public swimming baths?

Answer:—

If the swimming bath water is well chlorinated, it is quite safe to use the baths because the virus of Polio-myelitis cannot survive in such circumstances.

- (2) Should operations for enlarged tonsils and adenoids be performed during the epidemic?

Answer:—

During an epidemic of Polio-myelitis such operations should not be undertaken unless they are of an emergency nature. The reason for this is that the chief method of spread is by spray infection from the mouth and nose and a raw surface, such as occurs after the removal of tonsils and adenoids, forms a splendid breeding place for the virus. These operations, unless of an emergency nature, have been suspended at the Royal Aberdeen Hospital for Sick Children, the Aberdeen Royal Infirmary and the City Hospital, Aberdeen. When the disease is on the wane, the ban on operations for enlarged tonsils and adenoids will be lifted.

- (3) Should schools be closed, and, if not, what preventive measures should be adopted?

Answer:—

The epidemic, in its existing proportions, does not justify the closure of schools. At the commencement of the epidemic, instructions were issued in connection with preventive measures to be adopted in the County schools, and some of these measures are detailed hereunder:—

- (1) The class-rooms should be thoroughly ventilated during the whole period of occupation.
- (2) The pupils should be placed as widely apart as possible.
- (3) Individual writing material, books, pencils, etc., should be provided.
- (4) The use of common towels should be discouraged. Parents might, in this emergency, supply their children with small towels.
- (5) Intimate contacts should be excluded from school for a period of 21 days. In non-epidemic periods, it is not usual to exclude contacts.

- (4) Should cinemas be closed?

Answer:—

It was not considered necessary to close cinemas.

Generally speaking, no action was taken to exclude adult contacts from their work, but those contacts who handled food were warned to be particularly careful in the matter of personal hygiene. In connection with exclusion from work, the case of each adult contact had to be considered on its merits.

Encephalitis Lethargica (Sleepy Sickness)

No notifications were received in 1947.

Cerebro-spinal Fever

In 1947, 8 cases of cerebro-spinal fever were notified and all were removed to hospital. There was one death.

Ophthalmia Neonatorum

Four cases of ophthalmia neonatorum were notified and were treated in hospital. The results of treatment were satisfactory.

Erysipelas

In 1947, 77 cases were notified. Twenty were treated in hospital, with satisfactory results.

Undulant Fever (and Continued Fevers)

There were notified 3 cases of undulant fever, of whom 2 were removed to hospital.

Pneumonia

Pneumonia, if acute and primary, is a notifiable disease. In 1947, 332 cases were notified and 160 received institutional treatment. The cases were as follows:—

Acute Primary Pneumonia ...	...	208
„ Influenzal „ ...	...	15
Type not specified ...	...	109
		<hr/>
		332
		<hr/>

In 1946, 377 cases were notified. During the year, pneumonia accounted for 61 deaths.

Malaria

Two cases of malaria, contracted abroad, were notified in 1947. Both cases were treated at home.

Dysentery

Seventy-nine cases of dysentery were notified in 1947, and, of these, 6 were treated in institutions.

Reports on Outbreaks of Dysentery

(1) *Outbreak due to S. Dublin.*

On 7th, 8th and 9th September, 1947, there occurred at Kincardine O'Neil a large outbreak of food poisoning which involved no less than 97 individuals, almost half of the entire population of the village, including the farmer who supplied the milk, his family and his farm workers. The first cases became ill on the evening of the 7th, a larger number was affected on the 8th and a few on the 9th. Enquiries in the village showed that 33 families were involved and that 42 males and 55 females were affected. The age incidence of the cases was as follows:—

Age	Male	Female	Total
Under 1	—	1	1
1 - 5	4	1	5
5 - 15	8	10	18
15 - 25	3	5	8
25 - 35	5	6	11
35 - 45	8	10	18
45 - 55	3	6	9
55 - 65	2	5	7
65+	9	11	20
	<hr/>	<hr/>	<hr/>
Total	42	55	97
	<hr/>	<hr/>	<hr/>

The incubation period was found to vary from 3 to 48 hours. The symptoms were fairly uniform, the malady usually commencing with headache, nausea, abdominal and generalised pains associated with feverishness and an increased pulse rate. Vomiting and diarrhoea followed, the symptoms in some cases being very distressing and the diarrhoea most urgent, stools being passed at a rate of 5-6 per hour in some instances. The stools were loose and green with an offensive odour but there was no macroscopic evidence of blood. The duration of the illness varied greatly, some cases taking at least 5 days to recover, and most of the affected individuals complained of exhaustion after the acute stage had passed. There were no fatalities.

Investigation at once showed that the only common food substance was milk and, when the dairy which supplied the milk to the village was visited, it was found that a cow had taken ill about the 5th September, and was so ill on the 6th that a veterinary surgeon was called to see her. This animal died on the 7th at the farm and the carcass was taken to the knackery on the 8th where a post-mortem examination by the Veterinary Investigation Officer showed signs of a severe enteritis with marked inflammatory changes in the stomach and small intestine. The herd at the farm consisted of some 16 cows in milk, and, in addition to the animal which had become acutely ill, another cow had been off her food and 2 calves had had diarrhoea. The farmer and his family, 3 farm workers and the wife of one of them developed enteritis on the 7th September, presumably as a result of drinking the previous day's milk.

Twenty-one specimens of faeces from various villagers showed the presence of *S. dublin*. In addition, samples of milks which had been obtained from the cows on the 5th September, 1947, and 6th September, 1947, showed the same organism, while a sample of the bulk supply taken on 9th September, 1947, after the cow had died, gave negative results. Further, from the material obtained from the carcass of the cow at the post-mortem examination a Gram-negative non-lactose fermenting organism was obtained by the Veterinary Investigation Officer and this was also proved to be *S. dublin*. All the remaining cows' milks were then investigated with negative results. *S. dublin* was not obtained from any of the faecal specimens from the cows, but was recovered from the faeces of both calves.

Repeated specimens of faeces from the farmer and his family and from the farm workers showed that all had become free from infection within 10 days of the onset of the illness. The calves were isolated from the rest of the herd and after about 14 days their faecal specimens also gave negative results.

(2) *Outbreak due to Sh. Manchester.*

From the Huntly district, 21 cases of dysentery were notified between the 8th and 14th October, and attention was called to a possible further 7 cases. In addition, from current talk in the Burgh, it appeared that many individuals must have had mild enteritis about this date, but did not have to call in their medical practitioners. Of those actually notified, 8 were males and 13 females, and they had the usual symptoms of abdominal pains, sickness and diarrhoea, which persisted for 24 to 48 hours. Some of the patients were quite prostrated by the infection but there were no deaths.

Investigations revealed that the only food substance used in common was milk obtained from one of the dairy farms supplying the Burgh. When this farm was visited it was found that the dairymaid's husband had had diarrhoea some five weeks previously, the dairymaid developed similar symptoms on the 5th October, and soon afterwards her two children became infected. Further, the mother-in-law and a grandson of one of the milkers on the farm also suffered from enteritis. The children of the dairymaid often accompanied their mother to the dairy scullery. The other relatives of the milker did not do so but obtained milk from the dairy.

Specimens of the faeces were obtained from all the individuals directly and indirectly associated with the dairy, and it was found that the dairymaid and her two children, the mother-in-law and the grandchild of the milker all showed the presence of *Sh. Manchester*. In addition, five specimens received from other patients showed the same type of organism.

As the dairy produced over 80 gallons of milk a day, the infected dairymaid was suspended from her work, and she and her children debarred from any contact with the milk. Thereafter, the incidence of these infections decreased, although a few secondary cases appeared in the already infected households. Samples of milk and water were also examined, but no pathogens were recovered. There seems to be little doubt, however, that in the process of handling the milk and milk bottles, the dairymaid and her elder child had infected the supply.

As regards administrative action in each case the dairy farms supplied about 30 gallons of milk daily to the villages concerned, and it was an easy matter to arrange that pasteurised milk should be substituted for the raw milk previously delivered to the consumers.

(b) Non-notifiable Diseases

The four chief non-notifiable diseases are measles, whooping-cough, mumps and chickenpox. Chickenpox ceased to be a compulsorily notifiable disease as from 31st December, 1932. The fact that these diseases are not compulsorily notifiable results in an absence of knowledge as to the exact measure of their actual incidence. Information as to their incidence amongst school children is obtained chiefly from Head Teachers, Attendance Officers and District Nurses. These diseases are usually not in themselves dangerous, but when severe complications ensue—and these usually involve the lungs—arrangements are made for the transference of the sufferers to appropriate institutions.

3. Disinfections

The number of official disinfections performed by the District Sanitary Inspectors during 1947 was as follows:—

TABLE IX.

	SCARLET FEVER	DIPHtheria	TUBERCU- LOSIS	OTHER	TOTAL
1947 ...	104	13	9	53	179

It must again be emphasised that a great deal of money and time is often fruitlessly spent on the official disinfection of rooms with gaseous disinfectants. With the exception of small-pox, typhus and "open" tuberculosis, when disinfection must be carried out in the most thorough manner, the most efficient room disinfection consists of fresh air, sunlight and the free use of soap and water. The education of the public as to the futility of official disinfection continues to be a very gradual process.

SECTION II.

Maternity and Child Welfare Services

The Maternity and Child Welfare Scheme covers the whole County including the Burghs.

Births and Birth-rates

The population of the County, including the Burghs, as estimated by the Registrar General to the middle of 1947, was 144,369. The number of live births registered in the area was 3,035, and the birth-rate was 22.9. The birth-rate for the whole of Scotland was 22.0.

The number of births classified according to nature of attendance at confinement was:—

(i) Maternity Services Scheme cases	...	...	...	...	...	1,349
(ii) Other domiciliary cases	...	...	(a) with doctor	...	...	224
			(b) with midwife alone	...	...	87
			(c) without doctor or midwife	...	...	27
(iii) Institutional cases (including those in private maternity and nursing homes)	...	...	(a) Maternity Services Scheme cases	...	...	1,105
			(b) Non-Scheme cases	...	...	297

Infantile Mortality

The infantile mortality rate—the number of deaths of children under one year per 1,000 live registered births—was 49.

The causes of infantile deaths were as follows:—

Infectious Diseases	...	...	...	...	...	6
Tuberculosis—Non Pulmonary	...	...	...	...	...	1
Respiratory Diseases	...	...	...	...	...	29
Diarrhoea, etc.	...	...	...	...	...	30
Diseases of the Nervous System	...	...	...	...	...	11
Congenital Debility, Prematurity and Malformation, etc.	...	...	...	...	...	75
Violence	...	...	...	...	...	4
Other causes	...	...	...	...	...	5
Total	...	...	...	...	...	161

The number of children dying under 4 weeks was 82—giving a total neo-natal mortality rate of 24.8 per 1,000 live births.

Deaths of Children between 1 and 5 years

The number of children dying between the ages of 1 and 5 years was 26.

The causes of deaths were as follows:—

Infectious Diseases	...	...	...	...	...	3
Tuberculosis — Non Pulmonary	...	...	...	...	...	3
Respiratory Diseases	...	...	...	...	...	4
Violence	...	...	...	...	...	7
Other Causes	...	...	...	...	...	9
Total	...	...	...	...	...	26

Still-Births

The number of still-births registered and corrected for transfers during the year was 79, representing a still-birth rate of 23 per 1,000 live and still-births.

Maternal Mortality

During 1947 there were five deaths of women from causes associated with pregnancy and child-birth. The maternal death rate per 1,000 live and still-births was 1.5. There were no deaths from puerperal sepsis.

The causes of deaths were as follows:—

Pulmonary Embolism	4
Post Partum haemorrhage (Caesarean Section)	1

Puerperal Fever and Puerperal Pyrexia

Thirteen cases of Puerperal Fever and 13 cases of Puerperal Pyrexia were notified. Twenty-two cases were treated in the special Puerperal Wards of Aberdeen City Hospital, and all recovered.

Ophthalmia Neonatorum

Four cases of Ophthalmia Neonatorum were notified during the year and all were treated in hospital. There was no resulting impairment of vision.

Maternity Hospital Provision

Normal cases, for whom institutional confinement is required, are admitted to Ellon Maternity Hospital, Fraserburgh Maternity Hospital, the Maternity Unit of Huntly Jubilee Hospital and to the several Cottage Hospitals where maternity cases can be accommodated. The accompanying statement shows the nature and extent of the midwifery work carried out in these hospitals during the year:—

Number of Confinements in Hospitals							
Ellon Hospital ... ..	...	...	...	...	...	...	284
Fraserburgh Hospital ... ..	...	...	...	...	...	...	258
Huntly Maternity Unit ... ..	...	...	...	...	...	...	205
Turriff Cottage Hospital ... ..	...	...	...	...	...	...	217
Kincairdine O'Neil Hospital, Torphins ... ..	...	...	...	...	...	...	144
Nicoll Hospital, Rhynie ... ..	...	...	...	...	...	...	99
Fyvie Cottage Hospital ... ..	...	...	...	...	...	...	90
Insch War Memorial Hospital ... ..	...	...	...	...	...	...	94
1. Ante-natal cases in Hospital ... ..	...	...	...	...	...	...	46
2. Abortions ... ..	...	...	...	...	...	...	3
3. Normal confinements—							
(a) with medical assistance ... ..	...	...	...	...	...	...	486
(b) without medical assistance ... ..	...	...	...	...	...	...	708
(c) number of deaths ... ..	...	...	...	...	...	...	1
4. Abnormal or complicated confinements—							
(a) instrumental deliveries ... ..	...	...	...	...	...	...	154
(b) other deliveries ... ..	...	...	...	...	...	...	42
(c) number of deaths ... ..	...	...	...	...	...	...	—
5. Number of infants born—							
(a) alive ... ..	...	...	...	...	...	...	1,373
(b) still-born ... ..	...	...	...	...	...	...	28

Home Visitation

The District Nurses and Health Visitors paid the following home visits under the Child Welfare Scheme:—

	First Visits	Total Visits
Infants	2,485	20,724
Children 1 - 5 years	1,240	15,901
Expectant Mothers	2,410	9,157

Child Welfare Clinics

There are nine Child Welfare Clinics provided by the Local Authority. These are conducted at Ballater, Bucksburn, Culter, Ellon, Fraserburgh, Huntly, Inverurie, Peterhead and Turriff.

The attendances were as follows:—

No. of children attending during year:—

(i) under 1 year of age ...	...	...	...	...	968
(ii) 1 year of age and over	...	...	...	...	235

No. of attendances during year:—

(i) under 1 year of age	...	...	...	...	7,360
(ii) 1 year of age and over	...	...	...	...	2,193

Day Nursery

The Day Nursery at Peterhead has accommodation for fifty children. Full advantage is taken of the facilities which the nursery provides for the care of the children of working mothers.

SECTION III.

School Medical Services.

1. *Staff Changes:—*

Dr. Mary Sellar was appointed a part-time Medical Officer with diphtheria immunisation work at schools as her chief duty.

Dr. Joseph R. Mutch resigned from the post of School Oculist on 15th November, 1946, and this opportunity is taken of recording appreciation of the very valuable services which he has rendered to the County of Aberdeen for the past eight years. He was succeeded by Dr. Charles Cockburn who commenced duties as part-time School Oculist on 1st December, 1946.

Sanction was obtained from the Council in March, 1947, to appoint two additional whole-time Dental Surgeons, thus bringing the dental staff up to the strength required to maintain an adequate County Dental Service. These posts have been advertised but no appointments have yet been made.

On the 10th March, 1947, the clerical side of the School Health Service suffered a grievous loss by the sudden and untimely death of Miss Dorothy Ednie. For the long period of 34 years Miss Ednie gave devoted and faithful service to this branch of public health work. The staff, both medical and clerical, felt keenly the loss of a loyal and courteous colleague.

2. *General Statistics:—*

Number of Schools:—

(a) Nursery	...	...	...	...	...	...	...	...	1
Primary	...	...	...	...	...	...	...	...	221
(b) Secondary	...	...	...	...	...	...	...	...	8
(c) (1) Special Schools	...	...	...	...	...	...	...	...	—
(2) Special classes at ordinary schools	...	...	...	...	...	...	...	...	—
(d) In receipt of grant from Education Authority and under medical inspection	...	...	...	...	...	...	...	...	230
Number of children on the registers	...	...	...	...	...	...	...	...	22,794
Number of children in average attendance	...	...	...	...	...	...	...	...	20,514

3. *Sanitary Condition of Schools:—*

To meet the need for increased accommodation at eighteen schools consequent on the raising of the school leaving age on 1st April, 1947, sanction was given to erect temporary pre-fabricated huts as annexes to the existing school buildings at Aboyne, Alford, Ballater, Culter, Fyvie, Huntly, Insh, Inverallochy, Inverurie Academy, Kemnay, Kintore, Longside, Lumphanan, Methlick, Peterhead Academy, Skene Central, Tarves and Turriff.

The erection of these huts has commenced at ten of these centres but progress in all cases has been slow owing to the shortage of labour and materials. No start has yet been made at the other eight centres viz., Aboyne, Alford, Culter, Fyvie, Kemnay, Longside, Lumphanan and Tarves. This building programme under the H.O.R.S.A. Scheme, when completed, will provide for 25 additional classrooms and 10 rooms for practical subjects.

The work on the new Bridge of Don School, the building of which commenced in May, 1939, and ceased during the war years, remains at a standstill. The classrooms which have been completed are occupied but owing to their exposed site and to the partial completion of the adjoining corridors, it has been difficult to maintain satisfactory room temperatures in some of the more exposed classrooms. This was particularly noticeable during the long severe snowstorm in the months of February and March, 1947, and special steps, of a temporary nature, had to be taken to alleviate the cold and draughty conditions present in these rooms.

The War-time Nursery at Fraserburgh was taken over from the Department of Health for Scotland and fitted up as a Nursery School. The School was officially opened in September, 1946, and is the first of a series of nursery schools likely to be established in the County in the future.

The comprehensive survey of the sanitary conditions, including heating, lighting and ventilation, at the County Schools, which it had been intended to carry out during the year, was unfortunately not fully completed for a variety of reasons. A survey, however, was made by the Divisional Sanitary Inspectors of the water supply and sanitary conveniences at all schools in their respective areas. Their reports show that there is still a number of

County Schools without satisfactory water supply and modern sanitary arrangements. In former years failure to provide the latter was usually associated with an inadequate water supply, and, with the present shortage of labour and building materials, there does not seem much prospect of an immediate improvement in this direction. The sanitary defects found were reported to the appropriate Department for attention and, where materials for the necessary repair work were available, contracts were fixed to remedy a number of these defects. Improvements have also been effected in the heating arrangements of a few schools by the installation of new low-pressure central heating systems.

4. Organisation and Administration:—

(a) System and Extent of Medical Inspection and Treatment:—

There is one change to record in the system and extent of medical inspection and treatment, namely, in the matter dealing with personal cleanliness of school children. It was felt that there was room for improvement in this field, and, to ensure the maintenance of a satisfactory standard of cleanliness, the provisions contained in Section 52 of the Education (Scotland) Act, 1946, were implemented. For the purposes of maintaining cleanliness, School Medical Officers and District Nurses—acting as part-time School Nurses—were appointed Authorised Persons under the Act to examine and treat children or young persons attending schools, junior colleges, or other educational establishments under the Local Authority's management. Where the parent, guardian, or young person, failed to cleanse the head, body or clothing within 24 hours of the receipt of a notice in writing from the School Medical Officer to do so, the School Nurse took steps to treat the defect at school, in the home, or at a Cleansing Centre. For the cleansing of verminous conditions of the head or body, the parasiticides, Lethane 384 Special and D.D.T. powder, were supplied free to Nurses.

The programme of routine age-group medical inspections was behind schedule for the first four months of the school year owing to the shortage of Medical Staff, but, with the return in January of a Medical Officer from the Services, the leeway in work was gradually being made up till the severe snowstorm, which paralysed motor and rail transport and isolated many rural areas during the months of February and March, completely suspended all school work for nearly five weeks. Despite this, however, it was found possible to complete the ordinary routine inspections at all the County Schools a week before the Schools closed for the summer vacation. Little time was thus left to re-visit schools, to examine children absent at the routine visit or to re-examine others under supervision.

The scheme of treatment for visual defects continued as in previous years. An important addition to the scheme, however, falls to be recorded. Provision was made to supply spectacles of a type recommended by the School Oculist and approved by the Local Authority, free to all school children who required them. The scheme provides for the Council's Optician (1) making up the required spectacles according to the School Oculist's prescriptions, and (2), forwarding the prepared spectacles to the School Oculist to be checked before they are despatched to the respective recipients. Facilities were also provided through the School Health Department for the repairing of the spectacles supplied at specially reduced rates, the cost to be met by the parent or guardian except in proved necessitous cases. Great difficulty is meantime being experienced in obtaining spectacle frames with the result that there is a delay of 6 to 8 weeks between the date of the order and the receipt of the spectacles by the children.

The advantages claimed for the provision of free spectacles are:—

- (1) It assures the treatment of the child's eye defect, and, provided that the spectacles are worn regularly according to instructions, the cure or improvement of the refractive error present is expected.

Previously the provision of spectacles, except in necessitous cases, was the responsibility of the parent or guardian. The spectacles could be purchased either privately or through the School Eye Treatment Scheme at specially reduced rates, but in either case there was never any guarantee that this would be done. Experience has shown that many promises to provide spectacles never materialised with the result that many eye defects went untreated, and this in turn continued to affect adversely the scholastic progress of the children concerned. There is now no excuse for the child with defective eyesight to have his education interrupted through the lack of a pair of spectacles.

- (2) If a better quality frame than that provided is desired and purchased by the parent, the spectacles supplied by the Local Authority can be retained as a second pair in case of breakage.

- (3) The Local Authority have fulfilled their obligation to provide free treatment under the Education (Scotland) Act, 1946.

There is nothing further to add to the statement made in the 1945-1946 Report on the suggested improvements concerning treatment in the School Health Service except to state that proposals are on foot to provide better facilities for the educational treatment of educationally sub-normal children and for children suffering from speech defects.

In accordance with a Joint Circular issued by the Department of Health for Scotland and the Scottish Education Department (D.H.S. Circular No. 19/1947 and S.E.D. Circular No. 101/1947), a statement showing the staff employed by the Local Authority for the purpose of their School Health Service and of the arrangements made or which they propose to make for exercising their function in carrying on that Service was submitted in April, 1947, to the Secretary of State for Scotland.

(b) System and Extent of Dental Inspection and Treatment.

The only change that falls to be recorded during the year is that Dental Treatment of school children became a free service. The dental treatment consent card issued to parents or guardians had accordingly to be revised to meet this new provision. A new dental record card for boys and girls conforming to the specifications detailed in D.H.S. Circular No. 61/1947, dated 5th January, 1947, is being printed and being brought into use during the coming school year.

Details of the working of the Dental Scheme will be found in later pages of this Report.

(c) School Nursing and Arrangements for Following Up.

All nursing duties in connection with the medical inspection and treatment of school children are undertaken by District Nurses who act as part-time School nurses. Their duties are detailed in a memorandum circulated to each Nurse. Amongst the more important of these duties are—(1) to visit monthly each School in their area to supervise the cleanliness of each school child and to examine them for verminous conditions, and (2), to 'follow-up' at their homes or at school all children referred by the School Medical Officer for treatment.

(d) Co-ordination with the Public Health Services.

The close co-ordination which has existed between the School Health Service and the County Public Health Services for many years, continues to play an important rôle in the fight against disease, which these services are continually waging. The chief points of contact between the services may be summarised as follows:—

- (1) In the co-operative use of medical and nursing staffs.
- (2) In the use of common premises as Clinics e.g. at Bucksburn, Fraserburgh and Peterhead.
- (3) In the control and notification of infectious diseases occurring in schools.

It is appropriate here to record that new Regulations regarding the exclusion from school of children in whose home infectious disease has occurred were issued in August, 1946, by the Medical Officer of Health. A copy of these revised Regulations was sent to each Medical Practitioner, Head Teacher, District Nurse and Sanitary Inspector in the County, thus ensuring uniformity of action in matters pertaining to the control and notification of cases of Infectious and Contagious Diseases.

- (4) In the treatment of scabies and verminous conditions at the County Infectious Diseases Hospitals.
- (5) In treatment of certain conditions by ultra violet rays.
- (6) In the diagnosis and treatment of tuberculous conditions and in the supervision of children who are contacts of "sputum positive" cases.
- (7) In the immunisation of pre-school and school children by co-operative arrangements with the Maternity and Child Welfare Department.

(e) Co-operation with Voluntary Bodies.

One of the most useful forms of co-operative action with voluntary bodies is that which exists between the 45 County District Nursing Associations and the Local Authority. District Nurses not only act as part-time school nurses but also undertake other statutory nursing duties in connection with the other Public Health Services, the liaison officer between all concerned being the County Supervisor of District Nurses.

The Royal Society for the Prevention of Cruelty to Children is another body which actively co-operates with the School Health Service and thanks are due to this Society for their willing and helpful assistance.

Co-operation also exists with the voluntary hospitals in the area, viz:—the Aberdeen Royal Infirmary and the Royal Aberdeen Hospital for Sick Children. These institutions admit medical or surgical cases recommended for in-patient or out-patient treatment. In child guidance, valuable service and help have also been given by the Child Guidance Clinics associated with these voluntary hospitals and with Aberdeen University.

The Cripples' Welfare Association for North-East Scotland—a voluntary body dealing with the treatment of orthopaedic defects—also co-operates closely with the Local Authority at their Clinics established at Fraserburgh, Huntly and Peterhead.

Finally, there are all those other voluntary bodies granting the use of public parks and playing fields for recreational purposes, and to these the Local Authority again express their appreciation and thanks for their continued co-operation in making these facilities available.

(f) *Co-operation with Teachers and Parents.*

The cordial relations which have existed for many years between the teachers and the School Health Service continue to be maintained in a highly satisfactory manner. Many matters of mutual interest—be it educational or medical—are discussed. Grateful acknowledgement is made of the assistance which Head Teachers and Class Teachers alike have given to the visiting School Medical Officers and School Nurses.

The first point of contact with parents is usually at the routine inspection of school children, to which all parents are given a cordial invitation to be present when their children are to be examined. Experience has shown that the attendance of the parents is more frequent at the examination of the entrants. At later examinations, attendance is less frequent because parents become aware that anything requiring their attention will be notified to them by the School Medical Officers. On the whole the attendances of parents at routine school medical inspections in Aberdeenshire schools are very disappointing. Only 119 parents, equal to 1.7% of the children examined routinely, were present. The attendances are better in the Burghs than in the rural areas. The longer travelling distance to attend schools in the rural areas is a factor accounting for the difference in these attendances.

The next point of contact with parents occurs when children are examined as special cases at their homes. This home visitation is of far greater value and importance to the School Medical Officer as first-hand information can be obtained regarding the social and environmental conditions under which school children live. School Nurses too, form a very useful link between the School Health Service and the parents by giving helpful advice to parents when "following up" children at their homes.

Lastly there are the Parents-Teachers Associations whose meetings, now gradually being revived after being in abeyance during the war, form a valuable point of contact between parents, teachers, and the School Health Service.

5. *The Findings of Medical Inspection.*

The total number of children in the four age-groups examined systematically at the routine medical inspections was 6,725, of whom 3,377 were boys and 3,348 girls. To this total has to be added 32 boys and 23 girls routinely examined at the new Fraserburgh Nursery School.

The number of children who were presented to the School Medical Officers as special cases by the Head Teachers during the routine visits was 1,631, while the number of re-inspections was 1,376. Of the children systematically examined, 1,110 were notified to parents as requiring treatment of some defect. Details of the number of children examined and the number of children recommended for treatment in the various age-groups will be found in Table I.

As was recorded in the previous year's Report, weighing machines at each of the County Schools are now being serviced regularly. The average heights and weights of boys and of girls measured and weighed were as follows:—

Boys				GIRLS			
Number of Children	Average Age in Years	Average Height in Inches	Average Weight in lbs.	Number of Children	Average Age in Years	Average Height in Inches	Average Weight in lbs.
9	2 6/12	35.5	32.8	4	2 5/12	35.2	30.7
11	3 7/12	38.4	27.4	6	3 6/12	37.5	35.3
114	4 8/12	41.8	39.0	117	4 8/12	32.4	36.9
785	5 6/12	41.7	44.6	825	5 5/12	42.4	41.3
357	6 3/12	44.3	44.2	369	6 3/12	43.7	46.9
64	8 9/12	50.07	61.3	56	8 10/12	50.2	58.6
808	9 5/12	51.3	61.7	796	9 6/12	50.8	58.2
154	10 1/12	52.4	60.9	151	10 1/12	52.3	61.9
806	13 6/12	59.2	91.5	776	13 6/12	58.6	93.4
83	14 1/12	60.8	95.6	100	14 1/12	59.8	96.6
46	16 6/12	67.6	131.4	77	16 6/12	62.8	123.5
6	17 2/12	68.5	139.8	6	17 2/12	63.8	128.8

There is no evidence to show that the nutritional state of school children has deteriorated during the past year. The average heights and weights of both boys and girls in the entrant group remain about the same, but in the three other routine age-groups there are increases in heights and weights of both sexes compared with the previous year, the increases being greater amongst the boys. The system of rationing, the priorities for children of certain essential foods, the Milk in Schools Scheme and the School Meals Scheme are important factors in the maintenance of this good standard of health and nutrition in the school population.

The following is a tabulated statement showing the number and percentage of children recorded at the routine medical inspection of schools as suffering from specific diseases and disabilities. The percentages for the previous year are also given for purposes of comparison. The detailed results and sex distribution of the defects found in each of the four age-groups are shown in Table II.

Nature of Defect	Number Examined	Number Defective	Percentage Defective	Percentage Defective last year
1. Clothing unsatisfactory	6725	40	0.5	0.4
2. Footgear unsatisfactory	"	34	0.5	0.1
3. Uncleanliness—(a) Head	"	255	3.7	3.2
(b) Body	"	13	0.1	—
(c) Head and Body	"	3	0.04	—
4. Skin—				
(a) Head: Ringworm	"	—	—	0.01
Impetigo	"	5	0.07	0.3
Other Diseases	"	20	0.2	0.2
(b) Body: Ringworm	"	—	—	—
Impetigo	"	3	0.04	0.04
Scabies	"	58	0.8	0.9
Other Diseases	"	88	1.3	0.7
5. Nutritional State—				
(a) Slightly Defective	"	118	1.7	1.3
(b) Bad	"	3	0.04	0.2
6. Mouth and Teeth Unhealthy	"	74	1.1	1.8
7. Naso-pharynx—				
(a) Nose:				
(1) Obstruction requiring observation	"	132	1.9	1.06
(2) Obstruction requiring treatment	"	64	0.9	0.2
(3) Other Conditions	"	7	0.1	0.08
(b) Tonsils:				
(1) Requiring observation	"	700	10.4	9.4
(2) Requiring treatment	"	300	4.4	4.3
(c) Glands:				
(1) Requiring observation	"	447	6.6	7.4
(2) Requiring treatment	"	14	0.2	0.09
8. Eyes—				
(a) External Diseases—				
Blepharitis	"	65	0.9	0.9
Strabismus	"	56	0.8	1.06
Other Diseases	"	37	0.5	0.5
(b) Visual Acuity with/without glasses—				
(1) Fair	4052	267	6.5	4.5
(2) Bad	"	39	0.9	6.6
(c) Recommended for refraction	"	366	9.0	7.3
9. Ears—				
(a) Diseases—Otorrhoea	6725	26	0.3	0.2
Other	"	26	0.3	0.4
(b) Defective Hearing—Grade I.	"	4	0.05	—
Grade II.a	"	3	0.04	0.06
Grade II.b	"	1	0.01	—
Grade III.	"	2	0.02	—
10. Speech—Defective Articulation	"	28	0.4	0.3
Stammering	"	4	0.05	0.04
11. Mental and Nervous Condition—				
(a) Backward	"	21	0.3	0.2
(b) Dull	"	20	0.3	0.2
(c) Mentally deficient (Educable)	"	11	0.1	0.02
(d) Mentally deficient (Ineducable)	"	3	0.04	0.1
(e) Highly nervous or unstable	"	17	0.2	0.2
(f) Difficult in Behaviour	"	1	0.01	0.06
12. Circulatory System—				
(a) Organic Heart Disease:				
(1) Congenital	"	8	0.1	0.1
(2) Acquired	"	34	0.5	0.2
(b) Functional Conditions	"	129	1.9	1.3
13. Lungs—Chronic Bronchitis	"	51	0.7	0.3
Suspected Tuberculosis	"	3	0.04	0.09
Other Diseases	"	22	0.3	0.2
14. Deformities—				
(a) Congenital	"	21	0.3	0.2
(b) Acquired (Infantile Paralysis)	"	9	0.1	0.1
(c) „ (Rickets)	"	15	0.2	0.3
(d) „ (Other causes)	"	27	0.4	0.2
15. Infectious Diseases	"	1	0.01	0.3
16. Other Diseases or Defects	"	85	1.2	0.6

As will be seen from the above Table the percentages found this year in the various defects enumerated are, on the whole, much about the same as last year, the variations, if any, being less than 1%. The only exceptions to this general finding are visual acuity (see 8b.) and recommendations for refraction (see 8c)—where it will be noted that there is this year, an increase of 2% in the number of children with fair vision, a decrease of 5.7% in those with bad vision and an increase of 1.7% in the number recommended for refraction as compared with last year.

Among the other Diseases or Defects under item 16 above, the following is a statement of the nature and frequency of the conditions found:—

Anaemia—28; Enuresis—16; Enlargement of Thyroid—14; Hernia—12; Sprains and Injuries—10; Cysts—4; Schizophrenia—1.

With regard to the Nursery School, arrangements have to be made for the medical inspection of the children in attendance soon after admission and thereafter at regular intervals not exceeding six months. The number of defects found amongst children attending the Fraserburgh Nursery School was as follows:—

Uncleanliness of head—4; Nasal Catarrh—14; Tonsils, under observation—21; Tonsils, requiring treatment—10; Neck glands, under observation—8; Squint—1; Other Diseases—6.

Examinations conducted by the School Medical Staff other than Routine School Examinations.

In addition to the routine school work, a large number of special visits and examinations was made by the School Medical Staff. These examinations were of a varied character and their nature and extent are indicated in the following Table:—

(1) Absentee children or irregular school attenders	12
(2) Necessitous children	9
(3) Examination of Handicapped Pupils:—	
(a) Physically handicapped	24
(b) Mentally handicapped	65
(c) Maladjusted	15
(d) Blind and Partially sighted	3
(e) Deaf or Deaf-Mute	9
(f) Epileptic	2
(g) Speech Defects	19
(4) Certification of ineducable children to the General Board of Control	10
(5) Examinations under Children and Young Persons Acts:—	
(a) Juvenile delinquents	6
(b) Guardianship cases	94
(6) Examination of Education Committee Staff:— (teachers, janitors, school cleaners, clerical staff, etc.)	25
(7) Examination of students in preliminary training for the teaching profession	5
(8) Examination of “After School” Bursars	5
(9) Examination of children for admission to Linn Moor Home	35
(10) Examination of children participating in Pearson’s Fresh Air (Fortnight) Holiday Fund	60
(11) Diphtheria Immunisation:—	
(a) Number of initial inoculations administered to (1) School Children	4256
(2) Pre-School Children	868
(b) Number of re-inoculations administered to School Children	3157

6. Medical Treatment.

(a) *Minor Ailments.*

No clinics have, as yet, been established in Aberdeenshire for the treatment of school children suffering from minor ailments. It has been the practice in the past to refer all such cases, except those who could be suitably treated by the District Nurses at school or at their homes, to the family doctors. Details of the conditions treated by the Local Authority or privately are as follows:—

Defects	Local Authority	Privately
(1) Cuts, bruises, sprains and minor injuries, etc.	3	7
(2) Diseases of the Ear	1	41
(3) Diseases of the Eye, excluding defective vision	3	19
(4) Diseases of the Skin:		
(a) Ringworm (scalp)—		
X-Ray treatment	—	—
Other treatment	—	—
(b) Ringworm (body)	—	—
(c) Scabies	1	71
(d) Impetigo	1	13
(e) Other Diseases	4	62

(b) *Defective Vision and Squint.*

The Council's scheme for the treatment of visual defects continued to function as in previous years. Children who were found by the School Medical Officers at the routine medical examination of the schools to have visual defects sufficiently serious to require further examination and treatment were referred to the School Eye Specialist. All treatment, including the supply of the necessary spectacles, was provided free of cost to the parents.

Dr. Cockburn, School Oculist, reports as follows:—

Number of children examined—				Total
1st Examination—Boys	...	...	282	619
Girls	...	...	337	
Re-examination—Boys	...	...	134	280
Girls	...	...	146	
				899
No. of children with Refraction Errors ...				612
No. of new spectacles prescribed ...				402
Analysis of Refraction Errors—				
Hypermetropia	...	...	89	15%
Myopia	...	...	32	5%
Hypermetropic astigmatism	...	...	297	48%
Myopic astigmatism	...	...	64	10%
Mixed astigmatism	...	...	130	21%
				612
Pathological conditions met with were—				
Convergent strabismus	...	...		91
Divergent strabismus	...	...		4
Bilateral 6th nerve paralysis	...	...		1
Blepharitis	...	...		6
Conjunctivitis	...	...		2
Occlusio pupilla	...	...		1
Gargoylism with opaque cornea	...	...		1
Traumatic cataract	...	...		1
Congenital cataract	...	...		7
Nystagmus	...	...		6
Optic atrophy	...	...		3
Choroiditis	...	...		1
Congenital Ptosis	...	...		1
Corneal nebulae	...	...		8
Corneal ulcer	...	...		1
Persistent pupillary membrane	...	...		1
Bilateral Ectropion	...	...		1
Word blindness	...	...		1
Coloboma, iris and choroid	...	...		1

(c) *Nose and Throat Operative Treatment.*

School children requiring operative treatment for nose and throat defects were referred to the family doctors. A few practitioners carried out treatment, such as tonsillectomy, privately in the children's homes but most of them arranged for the cases to be operated on either at the Royal Aberdeen Hospital for Sick Children, at the Aberdeen City Hospital or privately at the local Cottage Hospitals, e.g. the Thomas Walker Hospital, Fraserburgh, and the Cottage Hospital, Peterhead. When the waiting list for tonsil and adenoid operations at the Royal Aberdeen Hospital for Sick Children grew excessive, arrangements were made, through the Medical Officer of Health, for operations to be performed on a number of these cases at the Aberdeen City Hospital in order to help to reduce the waiting period of children for treatment.

(d) *Orthopaedic and Postural Defects.*

The Orthopaedic Clinics at Peterhead, Fraserburgh and Huntly, conducted under the auspices of the Cripples' Welfare Association for the North-East of Scotland, continued to function throughout the year. More and more parents are taking advantage of the facilities provided at these clinics and good work has been done in the treatment of crippling conditions. Cases requiring surgical treatment are operated on by the Orthopaedic Surgeon at the Royal Aberdeen Hospital for Sick Children and the after-care of cases is performed by an orthopaedic sister who attends the Clinics and also visits the homes in certain cases.

Orthopaedic appliances, special boots, and artificial limbs were provided free of cost to those children in need of them. The following statement shows the number of attendances and the number of school children examined at these clinics:—

					Attendances			Number Examined
Fraserburgh Orthopaedic Clinic ...	...	...	...	...	81	...	...	12
Peterhead	"	"	...	...	51	...	...	21
Huntly	"	"	...	...	40	...	...	21
Total					172			
								54

Twelve school children suffering from postural defects were treated by the County Physiotherapist.

7. Dental Inspection and Treatment.

The only change to be recorded in the scheme of dental inspection and treatment was that dental treatment became a free service during the year. With the present staff of dental officers it has not been possible to inspect and treat all school children at least once a year, as they should be, but only at approximately fifteen month intervals. In order to give the adequate dental service required, two additional whole-time dental officers are being appointed.

During the year under review, the Dental Officers visited and inspected 130 schools. Of the 13,018 children inspected at these schools, 6,350 were found to require treatment, and, of these, 4,586, or 72.2%, intimated acceptance of treatment by Dental Officers. Children treated privately numbered 737, while refusals to treatment were 1,027 in number.

On the whole, the dental condition of school children shows a progressive improvement, and, like the improvement in nutrition noted previously in this report, the Milk in Schools and School Meals Services must be regarded as contributing factors to this satisfactory position. Full details of the working of the Dental Service will be found in Table V. of the Report.

8. Special Schools and Classes.

The arrangements, reported last year, made with the City of Aberdeen Education Authority for the treatment of speech defects were continued. Fifteen children suffering from speech defects were referred to the Speech Clinic during the year. Owing to the pressure of work, however, the Superintendent of Speech Training for Aberdeen City, who undertook this work voluntarily, finds that she is unable to give the children the individual attention they require and that she cannot, therefore, do justice to the cases. The Council have again decided to invite applicants for the post of Speech Therapist for the County.

At present no special schools or classes are provided in the County for children handicapped by physical and mental defects, but a start is to be made to establish special classes in Peterhead, Fraserburgh and possibly in one or two other burghal areas for those children who, by reason of mental retardation, are unsuitable for education in ordinary schools. With a waiting list of over 60 children requiring this form of special educational treatment, it is hoped that the provision of this long-felt want will not be further delayed through difficulty in finding suitable accommodation or specially trained teachers.

Educational treatment of the deaf is still an acute problem and nothing further has transpired as a result of the regional conference reported last year. Several urgent cases are on the waiting list for admission to Polmuir Road Special School, Aberdeen, and to Donaldson's School for Deaf Children, Edinburgh.

A blind girl was admitted to the Royal School for the Blind, Edinburgh, and another girl suffering from epilepsy to the Colony for Epileptics, Bridge of Weir.

Children suffering from debilitating or pre-tuberculous conditions received institutional treatment at Linnmoor Convalescent Home, Culter.

9. Arrangements for Physical Education and Personal Hygiene.

(a) The physical education of pupils is conducted by the class teachers in all primary schools, the instruction given being in accordance with that recommended by the Education Department. In the junior and senior secondary schools regular instruction is given by whole-time trained physical instructors. All the latter schools have gymnasia suitably equipped with the necessary apparatus and facilities for the changing of shoes and clothing. An increasing number of school playgrounds are now being tarmacadamised and this allows for physical exercises to take place out-of-doors whenever the weather permits.

(b) Swimming Baths.

No school in Aberdeenshire has its own swimming bath. Public baths are, however, available in the Burgh of Peterhead and in the City of Aberdeen and suitable arrangements are made for their use by County school children.

(c) Playing Fields.

Where playing fields are not attached to the Secondary Schools, facilities for football, netball, hockey, cricket, tennis and other outdoor exercises which form a regular part of the school routine, are made available at Public Parks or adjoining fields by arrangement with the local owners or occupiers. Similar facilities for seasonal recreational activities are also available at a few of the Primary Schools. The introduction of inter-school sports and matches in some of the school areas has done much to foster the cult of physical fitness and the development of the school team spirit. This is particularly noticeable in the Fraserburgh, Peterhead and Deeside areas where there are inter-school football matches. These games are keenly contested and have engendered a healthy but friendly local rivalry between the schools concerned.

(d) School Camps.

There is no holiday camp scheme in Aberdeenshire. Parties of children under the charge of a teacher do make their own arrangements to spend a camping holiday together, while others arrange for excursions to visit places of educational interest. In this connection, it may be of interest to record, that a party of boys from Oldmeldrum Troup of Boy Scouts, who last year spent an enjoyable camping holiday in Holland with brother scouts, was joined this year by a party of Dutch Scouts at their annual camp in Aberdeenshire during the summer vacation. Such reciprocal holiday camps have much to commend them for they are not only of educational value but are of national importance in helping to strengthen the bonds of friendship between the youth of this and other countries. Under the auspices of the Pearson's (Fortnight) Holiday Fund, three batches of twenty children from Peterhead enjoyed a fortnight's holiday at Linnmoor Home during their summer vacation.

(e) Instruction on Personal Hygiene.

The teaching of hygiene forms a part of the ordinary school curriculum. The instruction given is directed to the practical aspect of the subject and is chiefly concerned with the inculcation and practice of healthy habits. Particular attention is paid to such matters as personal cleanliness, dental hygiene, posture, breathing and recreation exercises between lessons, care of vision and the sanitation of the schoolroom. The importance of a good water supply and adequate washing facilities at schools in order to afford children the opportunity of practising habits of personal cleanliness cannot be too strongly emphasised. The insistence on clean hands at the partaking of the school meals and at sewing are good examples of this habit-forming practice. One of the most important yet most neglected hand-washing practices is that which occurs after visiting the lavatory. The simple precaution of washing the hands in running water after such visits, especially in the case of those concerned with the supply and distribution of food, would go a long way to reduce the incidence of all those communicable diseases of the gastro-intestinal tract resulting from ingestion of infected or contaminated food, milk, etc.

10. Other Activities in Relation to the Health of School Children.

(a) Mental Survey.

In June, 1947, the Scottish Council for Research in Education agreed to a request of the Population Investigation Committee to undertake a group Mental Survey similar to that conducted in 1932, in order to secure evidence for the Royal Commission on Population to determine whether there has been any decline in intelligence of school children in the interval between the two surveys. On the 4th June a group mental test of all eleven-year-old pupils attending schools throughout Scotland was carried out. Of this age-group a random sample, namely, all children born in 1936 on the 1st, 2nd, and 3rd days of each month and all twins born in 1936 irrespective of the day of the month they were born, was chosen for special investigation in respect of their social conditions and in regard to the presence of certain diseases or defects likely to impair their mental capacity. A special schedule was prepared for each of the 241 County pupils, among whom were 15 sets of twins, coming under this Random Sample Sociological Investigation. The major part of the home visitation entailed in this special investigation was carried out by the District Nurses who all gave their services willingly in order to make the Survey a success. School Medical Officers gave assistance in the work whenever it was needed. Opinions amongst Head Teachers regarding the results of the investigation vary, but the majority forecast that the average intelligence of school children in Aberdeenshire has declined since 1932. The results of the investigation will be awaited with keen interest.

(b) *Courses in First Aid and Home Nursing.*

Intensive courses of instruction in First Aid and Home Nursing for senior pupils attending the eight Secondary Schools were held as usual during the year in the interval between the written part of the leaving certificate examination and the summer holidays. Local medical practitioners and trained nurses conducted the courses in First Aid and Home Nursing respectively at six centres. One hundred and nineteen senior boys and girls attended the systematic and practical course in First Aid while 73 girls took the Home Nursing Course.

The following is a detailed statement showing the number of pupils from each of the Secondary Schools participating in these courses:—

SCHOOL	Number of Pupils attending	
	First Aid Course	Home Nursing Course
Ellon Secondary	9	6
Fraserburgh Academy	20	9
Huntly Secondary	21	16
Inverurie Academy	17	12
Kemnay Secondary	13	10
Peterhead Academy	20	9
Strichen Secondary	5	2
Turriff Secondary	14	9
Totals	119	73

(c) *School Meals Service.*

The Schools Meals Service has now progressed beyond the stage of novelty and is becoming a well established and valuable part of the ordinary school routine. Two systems of supply are in operation throughout the County area. In one, the food is prepared on the school premises either in specially built canteen kitchens or in school rooms converted into kitchens for that purpose. In the other system, the food is cooked in a central kitchen and transported in bulk in special containers to a number of nearby schools. The provision of a well-cooked, properly balanced, mixed diet, containing food of a good quality, is the aim which this service tries constantly to achieve and maintain.

Four of the Dining Halls scheduled for erection will be ready for use next session. The partaking of meals and the hygienic precaution of washing the hands before meals, are supervised by relays of teachers.

The number of schools at which two-course meals are served is 75, which is an increase of 22 schools over last year. In addition to this, light meals and soup meals are served at 68 and 53 schools respectively, making a total of 196 schools where meals of one kind or another are served. No meals at all are served in 34 schools—a reduction of 4 as compared with last year.

The number of two-course meals served daily is approximately 5,033 representing 22.2% of the school population and showing an increase of 1433 or 40.0% in the number of meals served for the corresponding period last year. Besides this, 723 pupils have light meals—cocoa and sandwiches, and 361 pupils, soup meals daily during the winter months.

(d) *Milk in Schools Scheme.*

As intimated in a Circular dated 28th March, 1946, the Government decided to provide school milk free of charge in all grant-aided primary and secondary schools from the date of the introduction of Cash Family Allowances on 6th August, 1946.

The Education (Meals Service) (Scotland) Regulations, 1946, prescribe that the quantity of milk supplied to schools shall be one third of a pint per pupil daily as a minimum and that it should be of a certain quality, viz:—Heat-treated milk or Tuberculin Tested Milk—and from a source approved of by the Medical Officer of Health. Where suitable supplies of liquid milk are not available the Regulations provide for the supply of dried full cream milk.

The number of schools supplied with (a) liquid milk (b) dried milk and (c) no milk at all, in each of the nine school areas, is shown in the following table:—

School Area	Number of Schools in Area supplied with		Number of Schools in Area where No Milk is supplied
	Liquid Milk	Dried Milk	
Aberdeen	28	—	4
Alford	12	3	9
Deeside	12	2	7
Ellon	23	1	3
Fraserburgh	22	—	4
Garioch	16	1	4
Huntly	5	8	11
Peterhead	29	2	2
Turriff	8	8	6
Totals	155	25	50

It will be seen from the above Table that 180 County Schools are supplied with either liquid or dried milk. The number of pupils taking liquid milk is 16,355 representing an increase of 8,294 or 102.8% in the number of pupils consuming liquid milk compared with the corresponding period last year. The number of pupils taking dried full cream milk is 530.

TABLE I

Total Number of Children examined at:—					Systematic Examinations	Other Systematic Examinations
(A) <i>Systematic Examinations</i>						
Ordinary Schools	{	Entrants ... ..	...	...	2673	—
	{	Second Age-Group ... ..	...	...	2144	—
	{	Third Age-Group ... ..	...	...	991	—
	{	Fourth Age-Group ... ..	...	...	4	—
Secondary Schools	{	Third Age-Group ... ..	...	...	779	—
	{	Fourth Age-Group ... ..	...	...	134	—
Total					6725	—
Nursery School	{	Two year olds ... ..	...	...	13	—
	{	Three year olds ... ..	...	...	17	—
	{	Four year olds ... ..	...	...	25	—
Total					55	—
(B) <i>Other Examinations</i>						
Special Cases					1631	
Re-Inspections by Medical Officers					1376	
Total					3007	

Number of children inspected at systematic examinations, who were notified to parents as requiring treatment (excluding uncleanliness and dental caries):—

Entrants	375
Second Age-group	421
Third „ „	292
Fourth „ „	4
Secondary Age-group	18
Total	1110

TABLE II
SYSTEMATIC EXAMINATIONS
Number and percentage of children in each Group suffering from particular defects

Nature of Defect	Entrants			Second Age-group			Third Age-group			Fourth Age-group			All Ages		
	Boys 1295	Girls 1378	%	Boys 1116	Girls 1028	%	Boys 914	Girls 856	%	Boys 52	Girls 86	%	Boys 3377	Girls 3348	%
1. Clothing unsatisfactory ...	3	11	0.2	10	9	0.8	3	4	0.3	—	—	—	16	24	0.4
2. Footgear unsatisfactory ...	—	32	—	1	—	0.08	1	—	0.1	—	—	—	2	32	0.05
3. Uncleanliness—(a) Head	19	115	1.4	11	90	8.8	4	15	0.4	—	—	—	34	221	1.0
(b) Body	1	2	0.07	4	1	0.09	4	1	0.4	—	—	—	9	4	0.2
(c) Both head and body	—	1	—	—	—	—	1	1	0.1	—	—	—	1	2	0.05
4. Skin—(a) Head: Ringworm	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Impetigo	3	1	0.07	—	1	0.09	—	—	—	—	—	—	3	2	0.05
Other Diseases	3	3	0.2	3	3	0.2	5	3	0.5	—	—	—	11	9	0.3
(b) Body: Ringworm	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Impetigo	2	—	0.1	1	—	0.08	—	—	—	—	—	—	3	—	0.08
Scabies	11	14	0.8	14	8	0.7	6	5	0.6	—	—	—	31	27	0.9
Other Diseases	17	19	1.3	19	17	1.6	7	9	0.7	—	—	—	43	45	1.2
5. Nutritional State—(a) Slightly defective	34	19	2.6	23	27	2.6	10	4	1.09	1	—	1.9	68	50	2.01
(b) Bad	—	2	0.1	—	1	0.09	—	—	—	—	—	—	—	3	0.08
6. Mouth and teeth unhealthy	13	19	1.0	14	12	1.1	10	6	1.09	—	—	—	37	37	1.09
7. Naso-pharynx—															
(a) Nose:															
(1) Obstruction requiring observation	52	41	4.01	26	8	0.7	3	2	0.3	—	—	—	81	51	2.3
(2) Obstruction requiring treatment	22	20	1.6	7	5	0.4	8	2	0.8	—	—	—	37	27	1.09
(3) Other conditions	4	1	0.3	—	2	0.1	—	—	—	—	—	—	4	3	0.1
(b) Throat:															
(1) Tonsils requiring observation	168	216	12.9	107	90	8.7	50	69	5.4	—	—	—	325	375	9.6
(2) Tonsils requiring treatment	96	94	7.4	28	38	3.6	19	25	2.07	—	1	1.1	143	157	4.2
(c) Glands:															
(1) Requiring observation	140	131	10.8	55	52	5.05	34	35	3.7	—	—	—	229	218	6.7
(2) Requiring treatment	—	2	—	5	1	0.09	3	3	0.3	—	—	—	8	6	0.2
8. Eyes—															
(a) External diseases—															
Blepharitis	9	13	0.6	—	16	1.5	15	9	1.6	1	2	2.3	25	40	0.7
Strabismus	22	17	1.6	—	6	0.5	7	4	0.7	—	—	—	29	27	0.8
Other Diseases	8	9	0.6	1	7	0.6	5	7	0.5	—	—	—	14	23	0.4
(b) Visual Acuity—															
(1) Fair	—	—	—	74	72	7.0	49	56	5.3	7	9	10.4	130	137	3.8
(2) Bad	1	—	0.07	10	17	1.6	3	4	0.3	1	3	3.4	15	24	0.4
(c) Recommended for refraction	19	22	1.4	84	98	9.5	59	66	6.4	9	9	17.3	171	195	5.06

TABLE II. (continued).

Nature of Defects	Entrants			Second Age-group			Third Age-group			Fourth Age-group			All Ages		
	Boys 1295	% 1378	Girls 1028	Boys 1116	% 1028	Girls 856	Boys 914	% 856	Girls 52	% 86	Boys 3377	% 3348	Girls 3348	% 3348	%
9. Ears—(a) Diseases: Otorrhoea Others (b) Defective Hearing: Grade I. Grade IIa. Grade IIb. Grade III.	2 5 1 — — 2	0.1 0.3 0.07 — — 0.1	3 5 2 1 — —	2 6 — — — —	0.1 0.4 — — — —	12 4 — 1 — —	7 4 1 2 — —	0.7 0.4 0.1 0.2 — —	— — — — — —	— 1.9 — — — —	11 16 2 2 — 2	0.3 0.4 0.05 0.05 — 0.05	15 10 2 1 — —	0.4 0.2 0.05 0.2 — —	—
10. Speech—(a) Defective Articulation (b) Stammering	12 —	0.9 —	7 —	4 3	0.3 0.2	1 —	3 1	0.3 0.1	— —	— —	19 4	0.5 0.1	9 —	0.2 —	—
11. Mental and Nervous Condition— (a) Backward (b) Dull (c) Mentally deficient (Educable) (d) Mentally deficient (Ineducable) (e) Highly nervous or unstable (f) Difficult behaviour	5 — 1 5 —	0.3 — 0.07 0.07 0.3	4 — 1 5 —	8 6 3 2 1	0.7 0.5 0.2 — 0.08	3 3 — 3 —	1 10 5 2 —	0.1 1.09 0.5 0.2 —	— — — — —	— — — — —	14 16 9 3 9 1	0.4 0.4 0.2 0.08 0.2 0.02	7 4 2 — 8 —	0.2 0.1 0.06 — 0.2 —	—
12. Circulatory System: (a) Organic heart—(1) Congenital (2) Acquired (b) Functional	— 5 25	— 0.3 1.9	2 7 30	2 4 25	0.1 0.3 2.2	2 11 17	2 1 9	0.1 1.07 1.6	— 5 22	— 1.9 —	4 10 59	0.1 0.2 1.7	4 24 70	0.1 0.7 2.09	—
13. Lungs— (a) Chronic Bronchitis (b) Suspected Tuberculosis (c) Other Diseases	18 — 8	1.3 — 0.6	19 3 5	7 — 4	1.3 0.2 0.3	2 — 1	2 2 2	0.1 — 0.09	— — —	— — —	27 — 14	0.7 — 0.4	24 3 8	0.7 0.08 0.2	—
14. Deformities— (a) Congenital (b) Acquired (Infantile Paralysis) (c) Acquired (Probable Rickets) (d) Acquired (other)	4 7 — 6	0.3 0.5 — 0.4	4 — 6 6	7 2 5 2	0.6 0.1 0.4 0.1	2 — 4 —	4 — 2 5	0.4 — 0.2 0.5	— — — —	— — — —	15 9 7 13	0.4 0.2 0.2 0.3	6 — 8 14	0.1 — 0.2 0.4	—
15. Infectious Diseases	1	0.07	—	—	—	—	—	—	—	—	1	0.02	—	—	—
16. Other Diseases or Defects	31	2.3	14	16	1.4	9	9	0.8	—	—	56	1.6	29	0.8	—

TABLE III

SYSTEMATIC MEDICAL EXAMINATIONS

CLASSIFICATION	ENTRANTS 2673		SECOND AGE-GROUP 2144		THIRD AGE-GROUP 1770		FOURTH AGE-GROUP 138		TOTAL ALL AGES 6725	
	Number	Percentage	Number	Percentage	Number	Percentage	Number	Percentage	Number	Percentage
I. Children free from defects	1,870	69.9	1,513	70.5	1,372	77.5	112	81.1	4,867	72.3
II. Children (otherwise free from defects) who suffer from—										
(a) Defective vision not worse than 6/12 in the better eye with or without glasses; or	16	0.7	149	6.9	89	5.02	13	9.5	267	4.0
(b) Conditions of the mouth and teeth requiring treatment	14	0.6	12	0.6	11	0.6	—	—	37	0.5
(c) Both (a) and (b)	—	—	—	—	—	—	—	—	—	—
TOTAL	30	1.3	161	7.5	100	5.62	13	9.5	304	4.5
III. Children suffering from ailments (other than those mentioned in II) from which complete recovery is anticipated within a few weeks	680	25.4	404	18.9	240	13.6	10	7.3	1334	19.9
IV. Children with defect less remediable than defects in II or III—										
(a) Where complete cure is considered possible	68	2.5	41	1.9	37	2.09	2	1.4	148	2.2
(b) Where improvement only is considered possible	25	0.9	25	1.2	21	1.2	1	0.7	72	1.1
TOTAL	93	3.4	66	3.1	58	3.29	3	2.1	220	3.3
Total number of children examined ...	2,673	100.0	2,144	100.0	1,770	100.0	138	100.0	6,725	100.0

TABLE IV

RETURN OF ALL EXCEPTIONAL CHILDREN OF SCHOOL AGE IN THE AREA

DISABILITY	At ordinary Schools	At Special Schools or Classes	At no School or Institution	TOTAL
1. Blind	—	7	—	7
2. Partially sighted—				
(a) Refractive errors in which the curriculum of an ordinary school would adversely affect the eye condition ...	—	—	—	—
(b) Other conditions of the eye, e.g. cataract, ulceration, etc., which render the child unable to read ordinary school books or to see well enough to be taught in an ordinary school	—	—	—	—
3. Deaf—Grade I.	—	—	—	—
,, IIa.	—	—	—	—
,, IIb.	2	—	—	2
,, III.	3	11	5	19
4. Defective speech—				
(a) Defects of articulation requiring special educational measures	10	—	—	10
(b) Stammering requiring special educational measures	9	—	—	9
5. Mentally defective (Children between 5 and 16 years)—				
(a) Educable—(I.Q. approx. 50-70) ...	85	33	3	121
(b) Ineducable (I.Q. generally less than 50)	—	11	26	37
6. Epilepsy—				
(a) Mild and occasional	—	—	—	—
(b) Severe (suitable for care in a residential school)	—	1	1	2
7. Physical Defective—(Children between 5 and 16 years)—				
(a) Non-pulmonary tuberculosis (excluding glands)	4	—	—	4
(b) General orthopaedic conditions	8	3	2	13
(c) Organic heart disease	32	—	1	33
(d) Other causes of illhealth	12	—	—	12
8. Multiple Defects—				
(a) Congenital heart and congenital deafness	—	—	1	1
(b) Cerebral palsy and mentally defective ...	—	—	1	1

TABLE V
DENTAL INSPECTION AND TREATMENT

The number of Children who were:—
(1) Inspected by the Dental Officers—

AGE							Systematic Examinations	Special and Emergency Cases	TOTAL
5	...	...	...	...	...	...	1080	24	1104
6	...	...	...	...	...	...	1346	18	1364
7	...	...	...	...	...	...	1438	31	1469
8	...	...	...	...	...	...	1390	8	1398
9	...	...	...	...	...	...	1359	17	1376
10	...	...	...	...	...	...	1424	39	1463
11	...	...	...	...	...	...	1336	22	1358
12	...	...	...	...	...	...	1312	11	1323
13	...	...	...	...	...	...	1270	17	1287
14	...	...	...	...	...	...	562	6	568
15	...	...	...	...	...	...	367	4	371
16 and over	...	...	...	...	...	...	134	10	144
Total							13018	207	13225
(2) Found to require treatment							6350	—	—
(2a) Accepting treatment							5323	—	—
(3) Actually treated by the School Dental Surgeons							4586	128	—
(4) Number of attendances made by children for treatment							4860	152	—
(5) Fillings:—									
(a) Permanent							2010	—	—
(b) Temporary							366	21	—
(6) Extractions:—									
(a) Permanent							970	44	—
(b) Temporary							4505	51	—
(7) Number of administrations of a general anaesthetic for extractions							—	—	—
(8) Other operations:—									
(a) Permanent							710	12	—
(b) Temporary							22	—	—
(9) Half days devoted to inspection							170	—	—
Half days devoted to treatment							520	—	—
(10) Number of children treated under private arrangements							737	—	—

SECTION IV.

Tuberculosis Services

Notifications

During 1947, 142 cases were notified as suffering from tuberculosis. In addition to these, 17 cases were notified by Medical Officers of Health of the areas in which they previously resided and were classified as 'transfers.' There were 10 re-notifications of cases who had been previously notified in the County or had been notified by more than one practitioner.

Of the 142 cases notified, 68 were notified as due to pulmonary tuberculosis and of these, 63 were proved bacteriologically to be suffering from the disease. There were 74 notifications of non-pulmonary tuberculosis and, of these, 62 were found, on further investigation, to be so suffering.

This number of cases of pulmonary tuberculosis is 14 more than were notified in 1946, and, indeed, is the highest number of cases of respiratory tuberculosis notified since 1937. On the other hand, the number of cases of non-pulmonary tuberculosis is the average notified during the past few years.

Table I gives the age distribution of males and females in the pulmonary and non-pulmonary types of disease:—

TABLE I
NUMBER OF CASES NOTIFIED AS SUFFERING FROM TUBERCULOSIS IN 1947

		Under 5 years	5 and under 10	10 and under 15	15 and under 25	25 and under 35	35 and under 45	45 and under 65	65 and upwards	Total
Pulmonary ...	Males	1	1	1	9	13	6	9	1	41
	Females	1	2	1	10	8	4	1	—	27
Non-pulmonary	Males	6	4	3	5	5	2	2	1	28
	Females	8	8	3	16	5	3	1	2	46
	Totals	16	15	8	40	31	15	13	4	142

The frequency with which the various parts of the body, other than the lungs, was affected is given in Table II.

TABLE II
LOCALISATION OF DISEASE—1947

The parts of the body affected in the 74 non-pulmonary cases were:—									
									Proved cases
1.	Glands ... ..	...	...	...	...	46	...	...	39
2.	Bones and Joints	...	...	...	...	11	...	...	9
3.	Brain membranes	...	...	...	...	2	...	...	2
4.	Abdomen ... ..	...	...	...	...	6	...	...	3
5.	Other sites (including lupus)	...	...	...	...	9	...	...	9
	Totals ... ..	...	...	...	...	74	...	...	62

The sources of notification are given in Table III.

TABLE III
SOURCES OF NOTIFICATION

The sources of notified cases were as follows:—

1. Notified by General Practitioners	...	...	...	...	67
2. Notified by Medical Officers of Medical or Surgical Hospitals	...	...	...	...	42
3. Notified by County Medical Officers of Health	...	...	...	...	15
4. Notified by Medical Officer of Mental Institution	...	...	...	...	1
5. Notified by Medical Officers of Health of other areas (transfers)	...	...	...	...	17
6. Re-notifications	...	...	...	...	10
7. Others	...	...	...	...	17
Total	...	...	...	...	169

Occupational Incidence

The vocations of the 142 primary cases notified are given in the following Table:—

TABLE IV

Occupation	Total	Number of Cases	
		Pulmonary	Non-pulmonary
Housewives	18	12	6
Ex-Service	17	16	1
Children	16	2	14
Schoolgirls	16	3	13
Schoolboys	9	2	7
Fish Workers	8	6	2
Farm Servants	5	3	2
Domestic Servants	4	1	3
Labourers	4	4	—
At Home	3	—	3
Clerkesses	2	—	2
Nurses	2	2	—
Prisoners	2	1	1
Retired Persons	2	1	1
Typists	2	1	1
Bank Accountant	1	1	—
Barman	1	—	1
Bakery Assistant	1	—	1
Chartered Accountant	1	1	—
Farmer	1	—	1
Gardener	1	1	—
Hairdresser	1	—	1
Insurance Agent	1	—	1
Joiner	1	—	1
Lorry Driver	1	—	1
Sawmiller	1	—	1
Shoemaker	1	1	—
Shop Assistant	1	1	—
Student	1	1	—
Telephonist	1	—	1
Toolmaker	1	1	—
Ward Maid	1	1	—
Waitress	1	—	1
No Occupation	14	7	7
Totals	142	69	73

Mortality

The number of cases notified in 1947 and dying before the end of the year was 23. The percentage of deaths to notifications within the year was therefore 16.2.

During the year, there were 59 deaths, of which 50 were due to pulmonary and 9 to non-pulmonary tuberculosis.

The total number of deaths from tuberculosis, namely 59, is the same as for the year 1946 and represents a death-rate of 0.41 per 1,000 of population. The fifty deaths attributable to the pulmonary form of the disease is higher than in the two previous years; it is the highest in Aberdeenshire since 1934, and represents a death-rate of 0.35 per 1,000 of population. The number of deaths from non-pulmonary disease, namely 9, is the lowest on record and the death-rate from this form of disease, 0.06 per 1,000 of population, is the lowest ever recorded in the County.

In Scotland, in 1947, there were 4,096 deaths from tuberculosis. Pulmonary tuberculosis accounted for 3,389 deaths and tuberculosis in other parts of the body for 707. The death-rate from all forms of tuberculosis for the whole of Scotland was 0.80 per 1,000 of the population. The death-rate from pulmonary tuberculosis in Scotland in 1947 was 0.66 per 1,000 and the death-rate from non-pulmonary tuberculosis was 0.14 per 1,000.

Table V gives the ages at death of the 50 cases of pulmonary disease.

TABLE V
PULMONARY TUBERCULOSIS—AGE AT DEATH

Age Groups	Number of deaths					
Under 15 years	—
15 - 25 years	8
25 - 45 „	32
45 - 65 „	7
Over 65 „	3
Total	50

Treatment

Table VI shows the disposition of patients in institutions and otherwise :—

TABLE VI

	Pulmonary		Non-Pulmonary	
A. Admitted to approved institutions	...	54	...	49
B. Not admitted to approved institutions because—				
(1) Refused to go to institutions	...	1	...	—
(2) Inmates of and admissions to Voluntary Hospitals	...	2	...	11
(3) Unsuitable for institutional treatment or such treatment not required	...	10	...	14
(4) Attending Lupus Clinic	...	—	...	5
(5) Treated Privately	...	—	...	3
(6) Inmates of Mental Hospital	...	1	...	—
(7) Attending for Ultra-violet Ray treatment	...	—	...	1
Totals	...	68	...	74

As in past years, most of the pulmonary cases were admitted to the County Hospitals at Inverurie and Strichen and to Newhills Sanatorium, Bucksburn. The number of admissions to Newhills Sanatorium was limited from time to time owing to staffing difficulties. Collapse therapy by artificial pneumothorax and pneumoperitoneum was initiated and maintained at all three institutions. Phrenic interruption was carried out in Woodend Hospital as an out-patient operation. Adhesion section and thoracoplasty were also carried out in Woodend Hospital. Certain cases requiring special treatment were admitted to the City Hospital and to Woodend Hospital.

Cases under treatment in County Hospitals and in Newhills Sanatorium were taken to and from Woodend Hospital by ambulance for X-ray examination, the portable X-ray apparatus being used only in emergency conditions.

Out-patients under treatment by artificial pneumothorax and pneumoperitoneum attended the hospitals at Inverurie and Strichen weekly for refills. Non-pulmonary cases were treated in Woodend Hospital and Stracathro Hospital, near Brechin. Cases of neck gland disease were treated at the Royal Aberdeen Hospital for Sick Children, at Aberdeen Royal Infirmary and privately at Inch Hospital. A few convalescent cases of orthopaedic tuberculosis were accommodated at the County Hospital, Inverurie, where they were examined regularly by an Orthopaedic Surgeon.

The number of children admitted during the year to Linn Moor Convalescent Home, Culter, was 32.

Dental Treatment.

Dental treatment was carried out by the whole-time School Dental Surgeons at the County Hospitals at Inverurie and Strichen, at Newhills Sanatorium, Bucksburn, and at Linn Moor Convalescent Home, Culter. Details of this treatment are given in Table VII.

TABLE VII

Name of Institution	Treatment carried out			Total number of 'Treatments'	Total number of patients treated
	Extraction	Filling	Scaling		
County Hospital, Inverurie	28	10	12	50	19
County Hospital, Strichen	13	14	11	38	10
Newhills Sanatorium, Bucksburn ...	4	5	6	15	9
Linn Moor Convalescent Home, Culter	14	3	4	21	12
Totals	59	32	33	124	50

Dispensary. Table VIII shows the number of patients who attended the four County Dispensaries:—

TABLE VIII

NUMBER OF PATIENTS ATTENDING TUBERCULOSIS CLINICS

Dispensary	Number of Patients		Total Number of Attendances	
1. Central, 4 Albyn Place, Aberdeen	302	...	542	...
2. Huntly	41	...	109	...
3. Peterhead	51	...	128	...
4. Fraserburgh	114	...	211	...
Totals	508	...	990	...

Clinic sessions were held twice weekly at the Central Clinic, 4, Albyn Place, Aberdeen, those at Peterhead and Fraserburgh every two weeks and those at Huntly every four weeks. Refills to patients under treatment by artificial pneumothorax and pneumoperitoneum were carried out at the County Clinics. Patients attending all County Clinics attended the City Hospital, Aberdeen, for periodic X-ray examination. Travelling expenses incurred were refunded to necessitous cases.

Domiciliary. The domiciliary treatment of tuberculosis consists of visits to patients by the Tuberculosis Medical Officer and by the District Nurses who, in addition to giving advice on health matters, carry out ordinary nursing duties. Drugs and special foods, sleeping shelters, and, in special cases, beds and bedding were supplied to necessitous cases. Twenty-six shelters were in use during the year.

During the year 106 patients were seen at their homes by the Tuberculosis Medical Officer. The District Nurses made no fewer than 1,820 visits to patients. One thousand and fifty five prescriptions were issued to patients chiefly by their own doctors.

Seventy eight tuberculosis 'contacts' were examined during the year.

X-ray examination is essential in the conduct of an up-to-date tuberculosis service and the extent to which this aid to diagnosis was used is shown in the following Table:—

TABLE IX
X-RAY EXAMINATIONS

Chest skiagrams	1234
Tomograms	26
Other X-ray Examinations	191

Tuberculosis Allowances Scheme. During 1947, 83 patients received financial aid under this Scheme.

SECTION V.

Venereal Diseases Services

Dr. F. J. T. Bowie, Regional Venereal Diseases Officer, has submitted details on the incidence and treatment of venereal diseases in the County during 1947.

In the report for 1946, mention was made that there was an indication of a decline in the prevalence of venereal infections. From the peak figure of 295 patients dealt with in 1946, there was a fall to 209 in 1947, a reduction of over 25%. It is most likely that this decline will be maintained, especially in respect of acute infectious cases.

It would not be surprising, however, to meet soon with a relative increase in cases of latent and late acquired syphilis and of congenital syphilis. Already there is more than a hint that, despite national propaganda, a proportion of syphilitic infections which have occurred in the recent years have not, for one or other of various reasons, received early treatment. This is not, of course, a new situation, but, with the high incidence of new cases of this disease over the past four to five years, there is almost bound to be some increase soon in the types of cases mentioned.

Compared with pre-war statistics, syphilis continues to be disproportionately more prevalent than gonorrhoea. This may be more apparent than real. With modern methods of treatment of gonorrhoea, it is possible that more cases of gonorrhoea are being treated privately by general practitioners than was customary in the past, when most cases of this infection were referred to Clinics for treatment.

Number of New Cases, Attendances and Laboratory Examinations.

The following Tables give details pertaining to cases in the County of Aberdeen. Of the total of 209 patients dealt with, 68, or nearly one-third, were found, after examination and observation, not to be suffering from venereal disease.

In addition to the 209 civilians, there were 4 cases from the Services, one of whom was proved not to be venereally infected.

TABLE I
INCIDENCE OF VENEREAL DISEASES—CIVILIAN CASES ONLY

YEAR	INCIDENCE					TOTAL NUMBER OF CASES	TOTAL NUMBER OF ATTEND- ANCES	LABORA- TORY EXAMINA- TIONS
	Syphilis	Gonor- hoea	Soft Sore	Non- specific Venereal Diseases	Non- Venereal Diseases			
1942 ...	52	39	—	41	24	156	3,194	1,974
1943 ...	48	43	—	47	57	195	4,098	2,722
1944 ...	30	32	1	41	61	165	2,728	2,337
1945 ...	30	43	—	38	68	179	2,652	2,295
1946 ...	57	94	1	68	75	295	5,031	4,059
1947 ...	40	59	3	39	68	209	3,335	3,263

TABLE II
INCIDENCE OF VENEREAL DISEASES—CIVILIAN AND FORCES CASES

Syphilis	Gonor- rhoea	Chan- roid	Other Condi- tions	Non- Venereal	Total number of cases	Total number of out-patient attend- ances	Total inpatient days	Total Labor- atory examin- ations	Special drugs supplied for Syphilis Doses
Civilians only: 40	59	3	39	68	209	3,335	1,196	3,263	659
Service cases: 1	1	—	1	1	4	33	21	—	—

With the exception of a small proportion carried out at the Treatment Centre at the Aberdeen Royal Infirmary, the laboratory examinations are performed at the Laboratory at the Aberdeen City Hospital.

Number of New Cases Admitted for Institutional Treatment.

During 1947, 53 cases were admitted for treatment to the City Hospital, Aberdeen, as compared with 73 in 1946. The 53 cases were as follows:—28 males civilians, 23 females civilians, and 2 males from the Forces.

The total number of in-patient days was 1,217, of which 1,196 were in respect of civilians, and 21 were accounted for by Forces cases.

Supply of Special Drugs for the Treatment of Syphilis.

Sixteen private practitioners were supplied during the year with 507 doses, and three institutions with 152, a total of 659 doses.

SECTION VI.

Bacteriological Services

The number of tests and examinations conducted at the City Hospital Laboratory, Aberdeen, was 14,674 as compared with 13,597 in 1946. The nature and extent of the work is shown below:—

	Positive	Negative	Total	Grand Total
<i>Bacillary Dysentery—</i>				
Faeces	52	176	228	228
<i>Weil's Disease—</i>				
Blood agglutinations			4	4
<i>Undulant Fever—</i>				
Blood agglutinations			72	72
<i>Glandular Fever—</i>				
Paul Bunnell Test			9	9
<i>Biochemical Examinations—</i>				
Bloods			185	
Urines			8	
Faeces			63	
Gastric contents			2	258
<i>Hamatological—</i>				
Blood counts			275	
Differential cell counts			219	494
<i>Amoebic Dysentery—</i>				
Faeces			4	4
<i>Waters—</i>				
Bacteriological examination of waters			545	
Chemical examination of waters			26	571
<i>Tuberculosis—</i>				
Sputum, etc.	280	668	948	948
<i>Venereal Disease —</i>				
Blood, smears, etc.	422	2724	3146	3146
<i>Diphtheria—</i>				
Throat, nose and ear swabs	4	835	839	839
<i>Puerperal Fever—</i>				
Pus			7	7
<i>Enteric and Food Poisoning—</i>				
Widals, blood cultures, etc.			232	232
<i>Milk—</i>				
Bacteriological examination of milks			2537	
Milks for phosphatase test			177	
„ „ fat estimation			839	
„ „ methylene blue test			1433	
„ „ resazurin test			192	
„ „ organisms			5	
Empty milk bottles for organisms			14	5197
<i>General Examinations—</i>				1961
<i>Autopsies—</i>			2	2
<i>Animal Inoculations—</i>				
Human specimens inoculated into Guinea				
Pigs for tubercle bacilli			134	
Milk specimens inoculated into Guinea Pigs				
for tubercle bacilli			524	
Urines inoculated into rabbits for pregnancy				
tests			34	
Urines inoculated into toads for pregnancy				
tests			10	702

SECTION VII.

THE NURSING SERVICES.

During 1947, a new District Nursing Association was formed at St. Combs. In that year there were 45 District Nursing Associations, employing 46 nurses. All these District Nursing Associations were affiliated to the County Nursing Association. The extent of the financial assistance given to each District Nursing Association was detailed in my Report for the years 1940 to 1945.

Health visitor/midwives were appointed to undertake duty in that portion of the north-east of the County so far uncovered by District Nursing Associations. Unfortunately, these health visitor/midwives performed only statutory work and did not overtake the nursing of general cases in their areas.

The District Nurses perform combined duties. Home nursing and midwifery occupy the major portion of their time. The health visiting aspect of their work embraces the following:—

1. Maternity and Child Welfare—

- (a) *Home Visitation* of all infants from birth until the age of five years. Advice on infant management and child rearing with, where necessary, practical demonstrations. The mother is invited to bring the child to the Child Welfare Clinic.
- (b) *Attendance at Child Welfare Clinics.* The nurse attends the Child Welfare Clinic held in her area. She is responsible for the general management of the Clinic and assists the Medical Officer.
- (c) *Immunisation.* The nurse takes an active part in propaganda connected with the immunisation of pre-school children against diphtheria. She will also give valuable assistance when it is found desirable to adopt vaccination against whooping cough as a routine measure.

2. School Medical Services—

- (a) Attendance with the School Medical Officers at routine medical inspections.
- (b) Periodic inspection of school children as to head and body cleanliness.
- (c) Follow-up visits to handicapped children both at school and at home.
- (d) Assisting the Medical Officers when immunisation against diphtheria is being carried out.

3. Tuberculosis—

- (a) Visitation of and advice to tuberculous cases in their homes.
- (b) Supervision of "contacts" of tuberculous cases.

4. Records—

Keeping of prescribed records in connection with the statutory schemes mentioned above.

In a rural area, there is a distinct advantage in having each nurse carrying out the home nursing, midwifery and health visiting work in her area rather than having one nurse for sick nursing, another for midwifery and a third for health visiting.

During the year, considerable difficulty was experienced in filling vacancies caused through resignations. The shortage of nurses is acute, recruitment is very difficult and the time seems to be opportune for the establishment in Aberdeen of a training centre for Queen's Nurses.

SECTION VIII.

Mental Health Services

The number of mental patients chargeable to the County Council as at 15th May, 1947, was as follows:—

1. Lunacy:

					Males.	Females.	Total.
In Hospitals	...	...	...	...	276	264	540
In Private Dwellings	...	...	...	...	8	13	21
					<u>284</u>	<u>277</u>	<u>561</u>

2. Mental Deficiency:

The distribution of certified ineducable mental defectives is given below:—

					Males.	Females.	Total.
In Institutions	...	...	...	...	47	38	85
Under guardianship in private dwellings					57	74	131
					<u>104</u>	<u>112</u>	<u>216</u>

Throughout Scotland there is a great shortage of beds both for juvenile and for adult mental defectives. As regards juvenile mental defectives, the greatest need is for additional accommodation for the ineducable class.

Prior to 1939, endeavours were made to establish a Colony for adult mental defectives in the North-Eastern region of Scotland and this matter was then fully considered, but the War intervened. The problem is not local; it is really national, and the provision of adequate accommodation for this class of mental defectives will ultimately devolve on the government.

3. Psycho-pathological Services:

In 1938, the Councils of the Counties of Aberdeen and Kincardine and of the City of Aberdeen decided to avail themselves of the services of the Psycho-pathology Department of Aberdeen University. The total numbers of County of Aberdeen cases dealt with since that date were:—

1938	...	45	1942	...	68	1946	...	156
1939	...	69	1943	...	103	1947	...	143
1940	...	57	1944	...	100			
1941	...	56	1945	...	118			

In 1938, the psychiatric social workers made 105 visits to the homes of patients in Aberdeenshire, Kincardineshire and in the City of Aberdeen, but in each of the subsequent years her visits exceeded 1,000 in number.

In 1944, a Child Guidance Clinic was established at the Royal Aberdeen Hospital for Sick Children and sessions are held here thrice weekly. The Courts and Probation Officers are making full use of these services which are of considerable value in dealing with juvenile delinquents.

Arrangements have also been made with the Educational Psychologist, Aberdeen University, whereby cases may be referred to the Child Guidance Clinic which is under his control.

SECTION IX.

SPECIAL SERVICES.

DIABETES.

In accordance with the provisions of the Public Health (Scotland) Amendment Act, 1925, the County Council approved, on 11th July, 1930, of a scheme for the supply of medicines and equipment to persons suffering from diabetes. Under this scheme, insulin, which is supplied through the agency of the City Hospital Laboratory, Aberdeen, was made available for diabetic patients. In non-insured and in necessitous cases, equipment, such as hypodermic outfits, is supplied free to patients. As many of the cases were unable to meet the expenses of special dietary, it was agreed in December, 1937, that payment should be made by the Local Authority towards the cost of special foods.

During 1947, the number of patients who received insulin was 52. The number in receipt of an allowance in respect of special foodstuffs was 11, and the cost of these was £166 4/3.

MALIGNANT DISEASE.

As the period for submission of complete arrangements under the Cancer Act, 1939, has been extended, the Local Authority has decided in the interim period to pay for the cost of the maintenance and treatment of cases suffering from malignant disease in Woodend Hospital, Aberdeen, and to defray the cost of travelling expenses of the patients when attending the Royal Infirmary, Aberdeen, as out-patients.

The number of cases treated in Woodend Hospital during the year under review was 8, and the cost of this treatment was £156 11/2. The number whose travelling expenses were defrayed by the Local Authority in attending the Out-patient Department, Foresterhill, Aberdeen, was 13 and the cost involved was £6 6/3.

The total number of deaths from malignant disease during the year was 205.

REGISTRATION OF NURSING HOMES.

Under the Nursing Homes Registration (Scotland) Act, 1938, there are nine homes registered and of these one is conducted as a private Nursing Home. The remaining eight are Cottage Hospitals, and in six of these a certain number of beds is reserved by the County Council by arrangement with the Boards of Management. Maternity cases are admitted to these six Hospitals at the request of the Council.

Inspection of the Homes under the Act is carried out by a Medical Officer of the Local Authority, who pays a visit at least once per annum, indicates and reports on any defects and scrutinises the registers. Records are kept in connection with all the Homes and on these are entered the inspecting officer's comments.

The following is a list of the Homes registered, showing in each case the number of beds. Where the Local Authority reserve beds, this is indicated by an asterisk:—

Name	Address	Number of beds	Number of cots	Remarks
Dee Valley Nursing Home	Ballater	6 general 3 maternity	—	In addition, there are 2 huts with three beds. The Local Authority have a cubicle block capable of accommodating 8 maternity cases.
*Fyvie Cottage Hospital	Fyvie	7	3	
*Huntly Jubilee Hospital	Huntly	45	—	
*Insch and District War Memorial Hospital	Insch	9 general 5 maternity	7	Used for general purposes: No maternity cases.
*Kincardine O'Neil War Memorial Hospital	Torphins	8	—	
*Nicoll Hospital	Rhynie	6	4	
Peterhead Cottage Hospital	Peterhead	24	2	Used for general purposes: No maternity cases.
*Turriff Cottage Hospital	Turriff	8 general 6 maternity	—	
Thomas Walker Hospital	Fraserburgh	30	1	

LOCAL AUTHORITY HOSPITALS.

The following Table shows the Hospitals which are under the control of the County Council and gives the number of beds available in each, the types of cases admitted, the number of cases admitted and the number of in-patient days in 1947.

Name of Hospital	Number of beds available	Types of cases admitted	Number of cases admitted	Number of in-patient days
Aboyne	36	Infectious and ordinary medical cases	42	2,088
Inverurie	80	Infectious cases, including cases of pulmonary tuberculosis	274	17,695
Peterhead	42	Infectious cases	133	2,202
Strichen	35	Cases of pulmonary tuberculosis	40	9,957
Ellon	15	Maternity	295	3,645
Fraserburgh	12	Maternity	268	2,713

A maternity unit of eight beds is attached to Huntly Jubilee Cottage Hospital, the Hospital Committee of which manage the unit on behalf of the County Council. As already stated, the County Council have also maternity beds reserved in the Cottage Hospitals at Fyvie, Insch, Torphins, Rhyne and Turriff.

AMBULANCE FACILITIES.

Ambulances for the removal of patients suffering from infectious diseases are stationed at Inverurie (2 ambulances), Aboyne, Peterhead and Strichen. In addition, at Huntly, there is an ambulance used largely for the transport of maternity cases in that district. All the ambulances in the County can be required to remove cases to the Maternity Hospitals. The ambulances are also available for the removal of general cases to Hospitals in Aberdeen as the necessity arises. The ambulance at Strichen is on loan from the St. Andrew's and Red Cross Scottish Ambulance Services.

HEALTH EDUCATION.

The campaign for greater physical and mental fitness has been publicised by the Scottish Council for Health Education. This Council have issued a very wide range of attractive leaflets dealing with many aspects of healthy living. The County Council give an annual grant to the Scottish Council for Health Education and in return receive a generous supply of leaflets which deal not only with the prevention of infectious diseases but also with the means whereby positive health may be attained. These leaflets have been widely distributed at the Child Welfare Clinics in the County.

The teachers in the County have performed splendid work in encouraging the immunisation against diphtheria of children of school age and the District Nurses and the family doctors have also done much to increase the number of pre-school children immunised against this dread disease which is most dangerous in the pre-school period.

The Scottish Council for Health Education also arranges "Health Weeks" and provide medical lecturers free of charge. From 13th to 21st November, a lecture tour was promoted in the County, and particulars of this tour are submitted herewith.

HEALTH EDUCATION — ATTENDANCES AT CENTRES.

Date		Place	Schools		Organisations		General		Total		Grand Total
			Pupils	Teachers	Young Persons	Adults	Children	Adults	Children and Young Persons	Adults	
13th	Nov.	Kinellar	103	4	—	—	—	—	103	4	107
”	”	Bridge of Don .	160	7	—	—	—	—	160	7	167
”	”	Belhelvie . . .	—	—	48	10	—	—	48	10	58
14th	”	Peterhead . . .	750	20	—	—	—	—	750	20	770
”	”	do.	850	23	—	—	—	—	850	23	873
”	”	do.	—	—	63	5	—	—	63	5	68
17th	”	Fraserburgh .	650	24	—	—	—	—	650	24	674
18th	”	Ballater	174	8	—	—	—	—	174	8	182
”	”	do.	—	—	—	—	—	20	—	20	20
19th	”	Ellon	300	8	—	—	—	—	300	8	308
”	”	Oldmeldrum . .	198	7	—	—	—	—	198	7	205
20th	”	Inverurie . . .	—	—	—	—	8	35	8	35	43
21st	”	Insch	115	6	—	—	—	—	115	6	121
”	”	Turriff	75	6	—	—	—	—	75	6	81
”	”	Ardmiddle . . .	—	—	—	35	—	—	—	35	35
Totals			3375	113	111	50	8	55	3494	218	3712

SECTION X.

Synopsis of Sanitary Inspectors' Reports.

A.—COUNTY SANITARY INSPECTOR'S REPORT.

Milk:

During 1947, there were 501 registered dairy premises in the County, and of that number 248 held Designated Milk Licences, as follows:—

Certified	10	Standard	127
Tuberculin Tested	109	Heat Treated ...	2

9,632,124 gallons of milk were produced in the County, consisting of:—

Certified	697,980	Standard	2,694,379
Tuberculin Tested ...	3,292,127	Ordinary	2,947,638

3,312 samples of milk were taken, of these 2,355 were satisfactory (71.1%) and 957 unsatisfactory (28.9%).

The following table shows the number of samples taken, under each Designation, and subjected for bacteriological analysis:—

	Satisfactory	Unsatisfactory	Total
Pasteurised and Heat Treated ...	28	12	40
Certified	76	2	78
Tuberculin Tested	546	114	660
Standard	906	334	1,240
Ordinary	799	495	1,294

358 samples were taken for biological examination, of that number 339 were negative (94.7%) and 19 positive (5.3%).

27 dairymen lost their Special Designated Licences during the warm spell in August; of that number 19 were ultimately restored on satisfactory samples being procured.

111 dairy farms were reconstructed during the year as follows:—

- (a) 37 reconstructions of dairy byres
- (b) 10 reconstructions of dungstead
- (c) 37 erections of dairy sculleries and milk houses
- (d) 8 water supplies
- (e) 19 minor improvements to dairies.

During the year District Sanitary Inspectors carried out 1,363 inspections and the Milk Officers 2,121 inspections.

Food:

The total amount of food condemned was 34 tons 2 cwts. 10 lbs. 1 oz.

Factories Act, 1947:

No. of Premises on Register — 789.

No. of Inspections carried out — 659.

No. of Written Notices — 10.

Particulars of the defects found were as follows:—

Want of cleanliness	10
Insufficient sanitary accommodation	15
Unsuitable and defective sanitary accommodation	20
No separate sanitary accommodation for sexes	6
Unreasonable temperature	2
Defective water supply	1

In the Burghs of Kintore, Oldmeldrum and Ballater, 51 premises are on the register and 36 inspections were carried out. One notice was sent.

Housing:

The number of houses built was 307 — 222 Pre-fabs.
65 Crudens
20 Traditionals

29 houses were erected by private enterprise for sale and 2 houses were erected by private enterprise for letting.

Housing (Agricultural Population) Act:

No. of new houses erected ...	...	...	...	...	...	...	7
No. of inspections ...	...	...	...	...	...	...	37

A survey was carried out by the District Sanitary Inspectors in order to estimate the number of houses likely to be required for agricultural workers on a three years' housing programme.

After consideration, the Housing Committee agreed to erect, in 1948, 246 houses for agricultural workers as follows:—

Aberdeen District ...	...	...	...	...	...	...	56
Ellon District ...	...	...	...	...	...	...	40
Alford District ...	...	...	...	...	...	...	8
Garioch District ...	...	...	...	...	...	...	50
Turriff District ...	...	...	...	...	...	...	16
Peterhead District ...	...	...	...	...	...	...	48
Fraserburgh District ...	...	...	...	...	...	...	20
Deeside District ...	...	...	...	...	...	...	8

Housing (Rural Workers) Acts:

No. of Reconstructions completed ...	...	...	...	...	...	...	48
No. of Inspections	126

Housing (Scotland) Act, 1930:

No. of Houses represented for closure	32
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Building Byelaws:

No. of improvements carried out	1109
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Complaints:

501 complaints were investigated.

Nuisances:

480 nuisances were found to exist. The nuisances consisted principally of:—

- Defective drainage.
- Choked drainage.
- Defective housing.
- Defective water supplies.
- Accumulation of refuse.
- Rat infestation.
- Dampness in houses, etc.
- Pollution of burn.

The number of inspections carried out in connection with nuisances was 591.

Sanitary Accommodation:

No. of new W.Cs. installed ...	...	...	...	...	...	...	508
No. of new bathrooms provided ...	...	...	...	...	...	...	408
No. of new sinks provided ...	...	...	...	...	...	...	615

Rats and Mice:

Rats exterminated	1369
Visits ...	...	...	...	...	...	...	49
Baits laid ...	...	...	...	...	...	...	5467

Meat Inspection:

Dyce Bacon Factory, Dyce.

Total No. of pigs inspected ...	...	...	...	...	...	29947
No. of visits made ...	...	...	...	...	...	241
No. of hours spent in factory ...	...	...	...	...	...	536
No. of total seizures ...	...	...	...	...	...	46
No. of partial seizures ...	...	...	...	...	...	222
No. of carcasses detained ...	...	...	...	...	...	4848
No. of heads seized ...	...	...	...	...	...	609
No. of lungs seized ...	...	...	...	...	...	206
No. of hearts seized ...	...	...	...	...	...	334
No. of livers seized ...	...	...	...	...	...	449
No. of kidneys seized ...	...	...	...	...	...	1270
No. of plucks seized ...	...	...	...	...	...	1191
Gut seized ...	...	...	...	...	...	1045

Total weight of carcasses seized:—19 tons, 16 cwts., 2 qrs.

Inverurie Slaughter House.

	Inspected	Passed	Seized Wholly	Seized Partially
Oxen ...	4092	3980	29	83
Bulls ...	47	42	4	1
Cows ...	779	645	102	32
Heifers ...	3395	3360	13	22
Calves ...	703	684	18	1
Sheep ...	16969	16889	61	19
Pigs ...	23	17	2	4
Grand Total ...	26008	25617	229	162

Total weight of meat condemned:—37 tons, 3 qrs., 26 lbs.

Turriff Slaughter House.

	Inspected.
Cattle ...	950
Sheep ...	2796
Pigs ...	39
Total ...	3785

Total weight of meat condemned:—16 tons, 4 cwts., 1 qr., 26 lbs.

Total weight of offal condemned:— 5 tons, 4 cwts., 2 qrs., 15 lbs.

Emergency Slaughters.

No. of animals inspected ...	...	...	...	...	...	160
No. passed ...	...	...	...	...	...	97
No. wholly condemned ...	...	...	...	...	...	15
No. partially condemned ...	...	...	...	...	...	48

Total weight of meat condemned:—1 ton, 1 lb.

Total weight of offal condemned:—5 cwts., 1 qr., 25½ lbs.

Water:

169 new water supplies were installed during the year. Samples were taken with the following results:—

Chemical.

Satisfactory ...	...	...	...	...	...	249
Unsatisfactory ...	...	...	...	...	...	53

Bacteriological.

Satisfactory ...	...	...	...	...	...	197
Unsatisfactory ...	...	...	...	...	...	150

Drainage:

10 miles, 4588 yds. of new drains were laid during 1947. 698 inspections were carried out and 548 drains smoke-tested.

Cleansing:

In the 47 Special Scavenging Districts in the County, cleansing arrangements were as follows:—

- 25 by private contractors.
- 3 by Aberdeen City Corporation.
- 19 by Deer District Cleansing Services.

In all cases the service was satisfactorily maintained but there were indications that many contracts would not be renewed for another year. In the circumstances steps were taken to extend the Deer District Cleansing Services if and when any emergency should arise in the County.

The Deer District Cleansing Services provided a complete twice-weekly scavenging service, including the sweeping of streets and emptying of gullies, in 19 Special Districts and a twice-weekly collection of refuse at the temporary Housing sites at Logie and Blackhills. In addition, a once-weekly collection of refuse was made from all schools in the Deer District.

Privy soil was removed from 2 military establishments and refuse was removed from 7 premises outwith special districts.

The Cleansing Services also act as caretakers of water and drainage in 5 Special Districts, and as caretakers of 7 Burial Grounds.

Waste paper was collected by the scavengers in the course of their duties, and, during the year, a total of 26 tons, 2 cwts., 3 qrs. was delivered to the Paper Mills.

The plant employed consisted of 5 refuse collection vehicles.

Food and Drugs:

The number of samples were as follows:—

Formal.

Satisfactory	...	...	...	...	...	...	...	...	116
Not genuine	...	...	...	...	...	...	...	...	6
Convictions	...	...	...	...	...	...	...	...	2
Warnings	...	...	...	...	...	...	...	...	2

Informal.

Genuine	...	...	...	...	...	...	...	...	225
Not genuine	...	...	...	...	...	...	...	...	2

B.—BURGH SANITARY INSPECTORS' REPORTS.

Water Supplies:

Peterhead

As mentioned in the Annual Report of 1946, the water supply to the Burgh has proved inadequate and the auxiliary supply from the R.A.F. Station had to be increased from 90,000 gallons per day to 200,000 gallons per day. The laying of the new 14" main from Silver Spring has been delayed due to difficulties in track digging but it is hoped that completion will be made in the very near future.

Inverurie

Here, too, shortage of supply has been experienced, this having been aggravated by the erection of new houses. A scheme for improving the supply has been submitted to the Department of Health whose approval is awaited.

Huntly

A temporary shortage resulted from the exceptionally dry summer weather. An inspection of the reservoir and pipe-line was made by Mr. A. F. S. Gordon of the Department of Health and his recommendations followed, including a plan to renew the existing pipe-lines in a period of 10 years.

Rosehearty

Augmentation to this supply is urgently required, especially in view of the fact that a scheme of 52 houses is in course of erection.

Fraserburgh

Although no great difficulty was encountered, it became evident that the supply was dependent to an ever increasing extent on the reliability of pumps.

Ellon

This supply remains adequate for the demands made on it.

Drainage:

Peterhead

A new sea outfall is in course of construction and it is hoped to have this finished in 1948. Otherwise, the system functioned efficiently.

Inverurie

The increase in the number of water points in dwellings due to modernisation and new houses built has resulted in the sewers becoming overloaded. This will have to be given serious consideration at a very early date.

Huntly

No difficulty.

Fraserburgh

No difficulty.

Nuisances:

These were dealt with by notification in the usual way and, where deemed necessary, Intimations were served.

Cleansing and Salvage:

Cleansing was carried out efficiently and no complaints were received. The question of disposal of refuse in Fraserburgh creates a serious problem.

Waste Paper continues to be collected under the Salvage of Waste Scheme.

Slaughter-houses:

The following Table gives the number of animals killed at the four Public Slaughter-houses:—

			Cattle	Calves	Sheep	Pigs
Peterhead	...	...	1460	18	3805	11
Turriff	...	...	950	—	2796	39
Inverurie	...	...	8358	709	16736	20
Fraserburgh	...	...	1829	31	4120	26
Totals	...		12597	758	27457	96

Food Inspection:

17 tons 8 cwts. of assorted foods were condemned in the various Burghs.

Housing:

			Traditional		Others	
			Started	Completed	Started	Completed
Peterhead	...	...	40	20	—	—
Turriff	...	...	16	12	—	—
Inverurie	...	...	46	22	50	38
Fraserburgh	...	...	—	24	—	—
Huntly	...	...	—	14	16	18
Rosehearty	...	...	24	—	—	—
Ellon	...	...	—	10	—	—
Totals	...		126	102	66	56

Offensive Trades:

Inverurie — Gut and Tripe Cleaning. No complaints were received.

Factories:

			No.	Inspections	Defects	Remedied
Inverurie	...	...	47	74	3	3
Huntly	...	...	37	42	—	—
Fraserburgh	...	...	135	109	20	20
Peterhead	...	...	260	380	61	57
Turriff	...	...	72	57	—	—
Ellon	...	...	23	33	7	6
Totals	...		574	695	91	86

